

THE MEDICAL AND SURGICAL REPORTER.

WHOLE SERIES,
NO. 184.

PHILADELPHIA, OCTOBER 1, 1859.

{NEW SERIES,
VOL. III. NO. 1.

SOME ACCOUNT OF THE Schools of Medicine, HOSPITALS, DISPENSARIES, PRIVATE LECTURES, AND OTHER MEANS OF IMPARTING Medical Instruction IN THE CITY OF PHILADELPHIA.

As incident to our location, we issue this week the *Student's Number* of the MEDICAL AND SURGICAL REPORTER, conveying to students of medicine who resort to this city, information in regard to medical teaching, which they will find very useful to them.

There are now in this city, or on their way here, several hundred young gentlemen, most of them well educated, and highly accomplished, and all of them from among the more intelligent classes in the various communities in which they reside. They come here with high hopes and ardent expectations, to pursue their inquiries in one of the most difficult departments of human study. Some of them may not realize the difficulties they have to encounter in the pursuit of their studies—the herculean labor of mind and body necessary to give them even a moderate standing in the profession of their choice. The realities of their position will, however, gradually unfold upon them as the sessions advance. They will find that to merely obtain a passport through the portals that guard the profession, they must work. Let that, but not that only, for the present, be their object. Let none of our readers entertain the notion that they will graduate from our schools “finished” in any of the departments of medicine. Ah! they are but clothing themselves with an armor which they “have not proved,” and when they “assay to go,” then will be the time to test what spirit they are of. Alas! how many in this first trial, from too much or too little confidence, fall, never to rise again!

But, there is another class. They plod on, day

after day, week after week—steadily on, nothing daunted, assured that “assiduous labor will accomplish all things.” This class are only satisfied with steady, but sure progress. *No per saltum* efforts characterize their progress, but firm, continuous, uncompromising labor and effort. Among these are our Hunters, Coopers, Watsons, Physicks, Chapmans, Woods, Dunglisons. They are *there*—time will develop them.

We trust that whatever student may read these lines, will bear in mind that he will be, in the future, just whatever he chooses to make himself. He will occupy either a high position among his fellows, or he will be a mediocre, according to the disposition he makes of his time and opportunities. Talent, education—we have not one word to say against either; nay, happy is he who has both, if he will but improve them. But talent and education will never make a physician, or even a learned man. Constant labor, dogged perseverance, that will not give way to trifles, will make ample amends for both. Let not that man, then, feel discouraged who perceives his apparent inferiority to others in these respects. We can tell him, as from the Delphian oracle, that industry, in nine cases out of ten, will more than supply the deficiency.

The great enemy of the medical student is idleness, especially when it is fostered by a resort to the billiard or the card table, the ten-pin alley, the drinking saloon, or the house of bad repute. We need not then say to the wise—avoid idleness. The facilities for the pursuit of medical studies in this city are very great, and due diligence in the use of means, will insure a success in medical acquirements that will have a bearing on one's course through life.

One word, in conclusion, in regard to expenses. In order to give the student a fair notion of the expense of a thorough course of medical instruction in this city, including two full courses of lectures and one summer's residence here under the tuition of a private preceptor, we have prepared the following table of expenses. We would premise, that while endeavoring to make a liberal allowance for all necessary expenses, we have supposed that the student, while living comfortably, and denying him-

self no real advantage in the pursuit of his studies, practices the strictest economy.

80 weeks' board, including two full winter courses, and one summer course, at \$4 00,	\$320
Washing, fuel and light,	50
Professors' Tickets—two full sessions,	210
Matriculation Ticket,	5
Preceptor's Tickets, 1½ years,	150
Practical Anatomy, 1 course,	15
Hospital Ticket, 1 course,	10
Clothing,	100
Books,	100
Graduating Fee,	30
Outfit—medicines and instruments,	70
Extras,	20

\$1,080

For the sum, therefore, of one thousand and eighty dollars, it will be seen that the student who desires to study economy can avail himself of the advantages held out to him in this city for two winter and one summer sessions, besides procuring a decent outfit in clothing, books, instruments and medicines. Of course, these estimates may be increased to almost an indefinite extent by those of more extravagant notions of living, enjoyment, &c., and they may possibly be reduced somewhat by practicing a still more strict economy in directions that will at once suggest themselves.

Medical Colleges, &c.

MEDICAL DEPARTMENT OF THE UNIVERSITY OF PENNSYLVANIA.

LOCATION.—Ninth Street, above Chestnut.

This is the oldest medical school in this country. The date of the appointment of the first medical professor was May 3, 1765. The idea of establishing a medical school in this city seems to have originated with Drs. Wm. Shippen and John Morgan. The latter gentleman was appointed, as above, "Professor of the Theory and Practice of Physic," and on the 23d of September following, Dr. Shippen received the appointment of Professor of Anatomy and Surgery. In 1768, Drs. ADAM KUHN and THOMAS BOND were added to the faculty, and on the 21st of June of that year the degree of Bachelor of Medicine was conferred on ten young men, being the first medical honors conferred in America. In 1769 Dr. BENJAMIN RUSH was added to the faculty. This may be said to have completed the organization of the school. It is not our purpose to follow its history any further.

The regular Lectures for the sessions of 1859-60 will commence on Monday, October 10th, and con-

tinue, without intermission, until the ^{first} middle of March ensuing.

Abstract of Regulations for the Degree of Doctor of Medicine.

Candidates are required:—

To have attained the age of twenty-one; to be of good moral character; to have applied themselves to the study of Medicine for three years, and been during that time the private pupil, for two years at least, of a respectable practitioner of Medicine.

To have attended two complete courses of the following Lectures, one of which must be in this Institution:

Theory and Practice of Medicine; Anatomy; Materia Medica and Pharmacy; Chemistry; Surgery; Obstetrics, and the Diseases of Women and Children; Institutes of Medicine.

To have attended one course of Clinical Instruction in ~~the Pennsylvania Hospital~~, or some other Institution approved of by the Faculty of Medicine.

To give evidence to the Dean that the above rules have been complied with.

To deliver to the Dean a Thesis, composed by himself, on some Medical subject, which is referred to one of the Professors, who shall examine the candidate upon it, and report to the Medical Faculty.

When a candidate is rejected, his essay will be retained by the Faculty.

The essay must be in the candidate's own handwriting, and must be written uniformly on letter-paper of the same size, the alternate pages being left blank.

Bad spelling in a thesis, or evidences of want of a literary culture, will preclude a candidate from examination for a degree.

A thesis may be published by a candidate if he desire it, with the permission of the Professor by whom he was examined thereon; but no alteration shall be made in such thesis without the consent of said Professor.

Candidates who have not been successful upon a first examination, will be permitted to have a second, when all the classes have been disposed of. This examination will be conducted at a full meeting of the Professors.

Candidates shall pay the fees of graduation at the time of examination.

The Degree will not be conferred upon a candidate who absents himself from the Public Commencement, except by special permission of the Medical Faculty.

EXPENSES.

Fees for the Course of Lectures,	\$105
Matriculating Fee, (paid once only,)	5
Graduating Fee,	30

The Wistar and Horner Museum contains an extensive Anatomical and Pathological collection, which is open to the students free of cost.

*Apply to R. E. ROGERS, M. D. Dean,
At the University.*

ANATOMICAL ROOMS.

JOSEPH LEIDY, M. D., Professor.

WM. HUNT, M. D., Demonstrator.

Assistants.

JAS. DARRACH, M. D. | H. D. SCHMIDT, M. D.

The ticket admits to the Dissecting Room, and to a course on Regional Anatomy and Recapitulatory Lectures. Dr. Schmidt gives instruction in microscopy.

Fee, \$10.

OPERATIVE SURGERY AND BANDAGING.

HENRY H. SMITH, M. D., Professor.

C. S. BISHOP, M. D., Demonstrator.

EDWARD SHIPPEN, M. D., Assistant Demonstrator.

The rooms, which are in the University building, are open on the 27th of September, and continue till the 1st of March ensuing. The course embraces the entire treatment of Fractures, Luxations, etc., with the application by each student of the proper bandages and splints. The order of the course coincides with that of the Professor of Surgery in the University of Pennsylvania, who, during the early part of the course, delivers a lecture every Monday evening.

The room is open every evening (except Saturday) from 7 till 10 o'clock. After the 5th of January surgical operations are performed on the cadaver by each member of the class.

Fee, \$10.

JEFFERSON MEDICAL COLLEGE.

LOCATION—Tenth street, below Chestnut.

Established in 1825, by the exertions of Dr. George McClellan, in connection with the Jefferson College at Canonsburg, Washington county, Pa., which arrangement continued until 1838, when a separate charter was obtained, and the connection ceased. The first building was the old Tivoli Theatre, in Prune street, below Sixth, now a mineral water establishment, where it remained till 1828, when the class becoming larger, it was removed to the present location, and the present building was erected. The faculty has been changed several times, but the present professors, with the exception of three recently appointed, have held their posts since 1840. Death has broken their ranks in one

instance, while two others of the faculty have resigned from ill health. One of these—Dr. Mütter, has since died.

The regular course of lectures for the Session of 1859-60 will commence October 10th, and continue till March 1st ensuing.

Regulations for the Degree.

Candidates are required:—

To be of good moral character, and at least twenty-one years of age; to have attended two full courses of lectures in some respectable Medical School, one of which shall have been in this College, and must exhibit their tickets, or other adequate evidence thereof, to the Dean of the Faculty; to have studied medicine for not less than three years, and have attended at least one course of clinical instruction in an Institution approved by the Faculty.

To present to the Dean of the Faculty a thesis, of his own composition, correctly written, and in his own handwriting, on some medical subject; and exhibit to the Faculty, at his examination, satisfactory evidence of his professional attainments. If, after examination for a degree, the candidate, on ballot, shall be found to have received three negative votes, he shall be entitled to a fresh examination. Should he decline this, he may withdraw his thesis, and not be considered as rejected.

The degree will not be conferred upon any candidate who absents himself from the public Commencement, except by special permission of the Faculty.

EXPENSES.

Fees for the course of Lectures,	-	-	-	\$105
Matriculating fee, (paid once only,)	-	-	-	5
Graduating Fee,	-	-	-	30

There is a fine collection of anatomical and pathological specimens in the Museum.

*Apply to R. DUNGLISON, M. D., 1116 Girard street,
or at the College.*

ANATOMICAL ROOMS.

JOS. PANCOAST, M. D., Professor.

E. WALLACE, M. D., Demonstrator.

The ticket admits to the Dissecting-rooms, and also to a course of Recapitulatory Lectures.

Fee, \$10.

MEDICAL DEPARTMENT OF PENNSYLVANIA COLLEGE.

LOCATION—Ninth street, below Locust.

This Institution was founded in 1839, and authorized to confer degrees in 1840. The regular course of Lectures for the session of 1859-60 will commence on Monday, October 10th, and continue, without intermission, until the 1st of March ensuing.

Requisites for Graduation.

Candidates are required :

To have attained the age of twenty-one years ; to be of good moral character ; to have applied themselves to the study of medicine for three years, (courses of lectures included,) and to have been during that time the pupil, for at least two years, of a respectable practitioner of medicine.

To have attended two complete courses of lectures on all the branches, one of which must have been in this institution.

To have attended at least one course of Clinical Instruction in some institution approved by the Faculty, and one course of Practical Anatomy.

To present to the Registrar a thesis composed by himself, on some medical subject, in the English, Latin, German or French language. It must be in the candidate's own handwriting, and written correctly, uniformly and distinctly. The Faculty, regarding this essay as evidence of the preliminary education of the candidate, will rigidly scrutinize it in regard to his attainments.

To pay his Graduation Fee at or before the time of his examination, which, if the candidate is unsuccessful, is returned, but the thesis is retained.

The degree will not be conferred on any candidate who absents himself from the public Commencement, without the permission of the Faculty.

EXPENSES.

Matriculation Fee, (paid once only,) - -	\$5
Graduation Fee, - - - - -	30
Fee for each Ticket, - - - - -	15

*Apply to LEWIS D. HARLOW, M. D., Dean,
1023 Vine st., or at the College.*

ANATOMICAL ROOMS.

WM. H. GOBRECHT, M. D., Professor.

T. A. DEMMÉ, M. D., Demonstrator.

The rooms are open during the day, and until 10 o'clock in the evening, from the latter part of September to the 1st of May.

FEE, \$10.

PHILADELPHIA COLLEGE OF PHARMACY.

LOCATION—Zane St., between Seventh and Eighth, and Arch and Market.

The 38th course of Lectures in this College begins on the 1st of October. The Lectures are given on Monday, Wednesday and Friday evenings of every week through the winter, at 7 and at 8 o'clock. The branches taught are *General Chemistry, Practical Pharmacy, and Materia Medica.*

Candidates for graduation are required :—

To attend two full courses of Lectures in a respectable College of Pharmacy, the last of which shall be in this institution.

To be of good moral character.

To have arrived at the age of twenty-one years.

To have served an apprenticeship of four years at the Drug and Apothecary business.

To present an original dissertation on a subject connected with one of the branches taught.

And to pass an examination before the Faculty and Committee of the College.

FEES.

For each course of Lectures, - - -	\$8
Matriculation Fee, (paid but once,) - - -	2
Graduating Fee, - - - - -	5

Apply to ALFRED B. TAYLOR, Secretary, S. E, cor. Ninth and Walnut Sts.

PENNSYLVANIA COLLEGE OF DENTAL SURGERY.

LOCATION—No. 528 Arch Street.

The Lectures commence on Monday, the first of November, but the Dispensary and Laboratory will be open from the 1st of October. Clinical Lectures are delivered, and operations performed, every Saturday afternoon. Fifteen lectures are delivered each week, on the various branches taught in the school.

There are five professorships, viz : of Dental Physiology and Operative Dentistry ; of Chemistry and Metallurgy ; of the Principles of Dental Surgery and Therapeutics ; of Anatomy and Physiology ; and of Mechanical Dentistry ; also, a Demonstrator of Operative Dentistry, and one of Mechanical Dentistry.

Candidates for graduation are required :—

To be twenty-one years of age, and of good moral character.

To have studied under a private preceptor at least two years, including his course of instruction at the College.

To have attended two full courses of lectures—the first in any respectable Dental or Medical College, and the last in this institution. (Five years of practice, inclusive of the term of pupilage, will also be considered equivalent to the first course of lectures.)

To prepare and defend a thesis upon some subject connected with the theory or practice of dentistry.

To treat thoroughly some patient requiring all the usual dental operations, and bring such patient before the Professor of Operative Dentistry. He must, also, take up at least one artificial case, and, after it is completed, bring his patient before the Professor of Mechanical Dentistry.

To prepare a specimen case, to be deposited in the college collection.

To perform the operations and the work in the artificial cases at the college building.

To undergo an examination by the Faculty, when, if found qualified, he shall receive the Degree of Doctor of Dental Surgery.

FEEs.

For the course, (Demonstrator's ticket included,) - - -	\$100
Matriculation, (paid but once,) - - -	5
Diploma fee, - - -	30

Apply to DR. W. CALVERT, Dean, 133 North Eleventh Street.

THE POLYTECHNIC COLLEGE.

LOCATION—Market Street and West Penn Square.

This institution is designed to educate gentlemen professionally for the practice of Civil, Mining, and Mechanical Engineering, Architecture, Manufacturing, and Agricultural Chemistry, Metallurgy, &c. The facilities are, as far as possible, similar to those of the best Polytechnic Institutions of Europe. The system of instruction has also been framed after the same models, with such changes only as the usages of this country seemed to demand. It is not necessary that a student should decide upon his profession before he enters. He may do so towards the end of the first year, after which his studies will have a special bearing upon his future calling. Quite a demand exists for the graduates, and the Diploma of the College is considered a passport to active and lucrative practice. Students are admitted to partial courses without examination.

The following are the professorships:

Applied Mathematics, Civil Engineering and Mechanics; Geology and Mine Engineering; Mineralogy, Industrial, Analytical and Agricultural Chemistry; Mechanical, Topographical and Architectural Drawing; Modern Languages and Literature; and a Lecturer on Industrial Jurisprudence.

Apply to ALFRED L. KENNEDY, M. D., at the College.

Practical Anatomy.

PHILADELPHIA SCHOOL OF ANATOMY.

LOCATION—College Avenue.

Entrance on Tenth Street, above Chestnut.

The Winter Term begins on the 1st of September, and continues till the 1st of March. The Anatomical Rooms are open for the pursuit of Practical Anatomy from 8 A. M. until 10 P. M.

There are five Lectures given every week, four being devoted to Special, and one to Surgical Anatomy. The lectures are given in the evening, at an hour that will not interfere with the exercises in the different institutions.

The Medical Colleges leave it optional with the student where he takes his dissecting ticket. The

opportunities for the prosecution of Practical Anatomy are equal to those in any of the colleges. There is a complete Anatomical Museum for purposes of demonstration.

A Spring Course on Practical, General and Surgical Anatomy, is given, commencing early in April.

Lecturer—D. Hayes Agnew, M. D.

Demonstrators—Drs. Levis, Flynn, Darby, Bolling and Richardson.

FEE, \$10.

A course of examinations is given on all the branches of medicine, commencing about the 1st of January, and continuing to the close of the college examinations for the degree.

Apply to DR. AGNEW, No. 16 North Eleventh Street, or at the Rooms.

COLLEGE AVENUE ANATOMICAL SCHOOL.

LOCATION—College Avenue.

Entrance on Tenth Street, above Chestnut.

The Winter Term begins on the 1st of September, and continues till the 1st of March. The Anatomical Rooms are open for the pursuit of Practical Anatomy every day, from 8 A. M. until 10 P. M.

There are five Lectures given every week, four of which will be devoted to General Anatomy, and one to Surgical Anatomy. The Lectures are given in the evening, at an hour that will not interfere with the exercises in the different institutions.

The Medical Colleges make it optional with the student where he takes his dissecting ticket. The opportunities for the prosecution of Practical Anatomy are equal to those in any of the Colleges. There is a complete Anatomical Museum for purposes of demonstration.

Lecturer—W. S. Forbes, M. D.

Demonstrator—W. D. Hoyt, M. D.

FEE, \$10.

These rooms are also open during the spring and summer months, to gentlemen wishing to prosecute Practical Anatomy and Operative Surgery.

Apply to DR. FORBES, 257 South 17th Street, or at the Rooms.

Hospitals.

PENNSYLVANIA HOSPITAL.

LOCATION—The Square bounded by Eighth and Ninth and Pine and Spruce Streets.

This Institution was founded in 1751, by Dr. BOXD and BENJAMIN FRANKLIN. It was first located on Market street, west of Fifth, south side; but removed to its present location in 1754. The present building was erected in 1756. It has a front of 281 feet, and is surrounded by spacious gardens, and shaded by lofty trees—the square on which it stands containing four and a quarter acres of ground. It has accommodations for — patients. During the

year 1851 there were 1,075 surgical and 747 medical cases admitted.

Physicians.	Term of Service.	Surgeons.
W. W. GERHARD, M.D.	Nov. 1 to Feb. 1	
J. J. LEVICK, M.D.	Oct. 1 to Jan. 1	G. W. NORRIS, M.D.
	Feb. 1 to May 1	
J. F. MEIGS, M.D.	Jan. 1 to April 1	E. PEACE, M.D.
	May 1 to Aug. 1	
J. G. SMITH, M.D.	April 1 to July 1	JOS. PANDOST, M.D.
	Aug. 1 to Nov. 1	
	July 1 to Oct. 1	E. HARTSHORNE, M.D.
<i>Resident Physicians.</i>		
H. L. HODGE, M.D.,	Geo. C. HAELEN, M.D.,	THOS. B. REED, M.D.
<i>Apothecary—JOHN CONRAD, M.D.</i>		
<i>Clerk and Librarian—DAVID T. LEWIS, M.D.</i>		

Times of Attendance of Medical Officers.

The Physicians give Clinical Lectures in the lecture-room of the Hospital at 10 o'clock A. M., on each Wednesday and Saturday of their term of service, and the Surgeons give Clinical Lectures on Surgery at 11 o'clock on the same days during their term of service.

During the summer months, besides the bi-weekly clinics, *daily visits* are made with a limited number of pupils to the surgical and medical wards, an additional opportunity being thus afforded the student to familiarize himself with the diagnosis and treatment of disease.

This hospital possesses much the largest medical library in this country, the collection amounting to about 11,000 volumes. It was founded, and is supported, by the fees derived from students' tickets.

EXPENSES.

A fee of \$10 entitles the student to the privileges of the Hospital for a year, including the use of the Library, under certain restrictions.

Apply at the Hospital, or to the Deans of the several Colleges.

PENNSYLVANIA HOSPITAL FOR THE INSANE.

This is a branch of the Pennsylvania Hospital, a section of that building having been appropriated to the use of the Insane till 1841, when the Insane patients were removed to the new structure, two miles west of the river Schuylkill. Extensive additions have recently been made to the buildings. On the 24th of April last, there were 235 patients in this department of the Pennsylvania Hospital.

Chief Resident Physician.—THOS. S. KIRKBRIDE, M. D.

Assistant Physician.—EDWARD A. SMITH, M. D.

PHILADELPHIA HOSPITAL.

LOCATION—West side of the Schuylkill river, about half a mile below Market street.

This is one of the most extensive institutions of the kind in the United States, having large buildings for the accommodation of the sick and insane.

It is divided into male and female wards; the former being again divided into surgical, medical, venereal, and clinical. The latter into the same, with the addition of obstetrical, nursery, and asylum for children. Here may be seen every variety of malady to which the human frame is liable. During the winter and the lecture season, students are admitted to the public clinics by the payment of \$5, which entitles the holder to visit it for one year. It is easily reached by means of the Market or Chestnut street Passenger Railways, or by omnibus.

This institution is managed by the Guardians of the Poor, a board of twelve men, who receive their appointment from the courts and the City Councils, and its chief support is derived from the Poor Tax of the city. The Medical Board consists of four visiting physicians, four visiting surgeons, and four visiting obstetricians, with eight assistants or "internes." The latter are selected according to merit from candidates who present themselves before the Medical Board for examination. These appointments are generally made early in April.

MEDICAL OFFICERS.

Physicians	Terms of Service.	Surgeons.
J. L. Ludlow, M. D.	Oct, Nov., Dec.	D. H. Agnew, M. D.
F. E. Lockett, M. D.	Jan., Feb., Mar.	S. P. Gross, M. D.
C. P. Tutt, M. D.	Apr., May, June	R. S. Kenderdine, M. D.
W. Mayburry, M. D.	July, Aug., Sept.	R. J. Lewis, M. D.
<i>Obstetricians.</i> —R. A. F. Penrose, M. D., Oct. Nov., Dec.; L. D. Harlow, M. D., Jan., Feb., Mar.; W. D. Stroud, M. D., April, May, June; J. Wiltbank, M. D., July, Aug., Sept.		

PHILADELPHIA LUNATIC ASYLUM.

This is a department of the Philadelphia Hospital, and is located in the Twenty-fourth Ward of the city, adjoining the buildings of the Philadelphia Hospital. It is an asylum for the residence and treatment of the insane poor. It has about 450 inmates.

Chief Resident Physician.—S. W. BUTLER, M. D.

Assistant Physician.—

WILLS HOSPITAL

FOR DISEASES OF THE EYE AND LIMBS.

LOCATION—Race street, between Eighteenth and Nineteenth, opposite Logan Square.

Founded by the late JAMES WILLS, and opened for occupation March 1st, 1834. Devoted to the treatment of curable diseases of the eyes, and of such curable diseases of the limbs as involve lameness. From 1,500 to 2,000 patients are treated in the course of the year, and there is an average of from thirty to fifty inmates.

Clinical Days—Mondays and Fridays.

Physicians	Term of Service.	Surgeons.
J. J. Levick, M. D.	Jan., Feb., Mar.	S. Littell, M. D.
J. J. Reese, M. D.	April, May, June	Wm. Hunt, M. D.
S. L. Hollingsworth, M. D.	July, Aug., Sept.	A. Hewson, M. D.
J. L. Tyson, M. D.	Oct., Nov., Dec.	

EDWARD LIVEZEY, M. D., *Resident Physician.*

CITY HOSPITAL.

LOCATION—*Islington Lane.*

Established by an Act of the Legislature in 1810, as a Small-pox Hospital, and used chiefly for small-pox, ship fever and cholera patients. There are accommodations for 150 beds, and a few cases of contagious or pestilential disease are generally to be found in the hospital, while during epidemics a large number of cases are received and treated.

Physician—JOHN BELL, M. D., 727 Spruce street.

ST. JOSEPH'S HOSPITAL.

LOCATION—*Girard avenue, between Sixteenth and Seventeenth Streets.*

This institution, which is under the immediate supervision of ladies of the religious order of St. Joseph, was founded in 1849, in great measure through the influence of the late Dr. W. E. HORNER. He bequeathed to the hospital his medical library and his collection of surgical instruments. By the terms of its charter, the benefits and advantages of the hospital are "extended to the sick, without reference to creed, country or color." Through the influence of Dr. Horner, we believe, it is also provided that the medical staff shall not be of a sectarian character. The hospital has accommodations for 100 patients.

Physicians.	Term of Service.	Surgeons.
S. W. Mitchell, M. D.,	Jan. 1 to May 1,	J. H. B. McClellan, M. D.
A. B. Keller, M. D.,	May 1 to Sept. 1,	W. B. Page, M. D.
W. V. Keating, M. D.,	Sept. 1 to Jan. 1,	

Accouchers—W. Flynn, Sen., M. D., A. C. Bournonville, M. D., J. D. Bryant, M. D.

Pathologist—Joseph Leidy, M. D.

Resident Physicians.—Drs. — and —.

Apply at the Hospital, or to any of the Surgeons or Physicians.

EPISCOPAL HOSPITAL.

LOCATION—*Corner of Huntingdon and Front streets.*

Founded by members of the Episcopal Church, but open to the sick of every country, creed or color. Opened for the reception of patients in December, 1853. Has accommodations for thirty patients. The number of patients treated in the wards during 1857 was 388, the average daily number having been thirty. In addition to these, 2,136 out-patients were treated.

Physicians.	Terms of Service.	Surgeons.
J. C. Morris, M. D.	Jan., Feb., March,	Wm. Hunt, M. D.
H. Hartshorne, M. D.,	April, May, June,	H. E. Drayton, M. D.
J. Da Costa, M. D.,	July, Aug., Sept.	R. S. Kenderdine, M. D.
Wm. Maybury, M. D.,	Oct., Nov., Dec.	R. P. Thomas, M. D.

Accouchers—J. Wiltbank, M. D., Jan. 1 to July 1; A. E. Stocker, M. D., July 1 to Jan. 1.

House Residents.—Drs. — and —.

There is a corps of ten assistant physicians and surgeons.

Apply to Rev. J. A. CHILDS, 524 Walnut street.

HOWARD HOSPITAL.

LOCATION—*Christian Street, above Fifteenth.**

This Institution was chartered in 1854, and now contains fifty beds. It has a board of ten physicians, each of whom devotes himself to a special branch of Medicine and Surgery. Clinics are held on each day, at specified hours. Accidents are admitted if brought immediately after to the Infirmary; curable and incurable cases, which are able to pay their board; such poor as may be deemed worthy objects of charity. Since its organization to the present time, (1858) 9,019 patients have been treated here, over 2,000 of which belong to the last year.

The Institution is supported by subscriptions and donations. Two Resident Physicians are always present to attend to cases and applications.

A. A. CARRUTH, M. D., and THOS. P. HOLLOWAY, M. D., Resident Physicians.

ORDER OF CLINICAL COURSE.

Diseases of the Digestive Organs.

Dr. Joseph Klapp, 622 Spruce street. Mondays and Thursdays at 5 o'clock P. M.

Chest and Throat.

Dr. J. A. Meigs, 1531 Lombard street. Tuesdays and Fridays at 10 o'clock A. M.

Skin.

Dr. O. A. Judson, Spruce street, below Twelfth. Tuesdays and Fridays at 4 o'clock P. M.

Eye and Ear.

Dr. L. Turnbull, 1208 Spruce street. Wednesdays and Saturdays at 10 o'clock A. M.

Urinary Organs.

Dr. Charles Neff, 1901 Chestnut street. Mondays and Thursdays at 12 o'clock M.

Obstetrics and Diseases of Women.

Dr. E. McClellan, 1441 Chestnut street. Tuesdays and Fridays at 12 o'clock M.

Fevers.

Dr. W. Darrach, 1120 Arch street. Wednesdays and Saturdays at 12 o'clock M.

Brain and Nervous System.

Dr. Geo. R. Morehouse, 227 South Ninth street. Wednesdays and Saturdays at 5 o'clock P. M.

Surgery.

Drs. D. D. Clark, 294 South Third street, and S. D. Gross, 201 South Eleventh street. Wednesdays and Saturdays at 9 o'clock A. M.

* The Trustees of this Hospital have secured a lot on Twenty-Second Street near Walnut, on which they propose soon to erect a building which, for the purposes of a hospital and conveniences for clinical teaching, will not be surpassed by any in the city.

CHILDREN'S HOSPITAL.

LOCATION—*Blight street, between Juniper and Broad, and Pine and Lombard streets.*

This institution has been in operation since November, 1855. It was established to meet an obvious want, there being no institution in the city devoted to the special treatment of diseases of children. "It aims to supply to the children of the poor in sickness a portion of the care and comforts which are enjoyed by the more favored classes—to surround them with circumstances favorable to recovery."

The hospital has accommodations for — patients, with the means of isolating particular cases. It has quite an extensive out-door department, in which during the year just closed — patients were treated.

Attending Physicians.—T. Hewson Bache, M. D., Francis W. Lewis, M. D., and R. A. F. Penrose, M. D.

Consulting Physicians.—Wm. Pepper, M. D., J. Forsyth Meigs, M. D.

Consulting Surgeon.—George W. Norris, M. D.

UNIVERSITY HOSPITAL AND DISPENSARY.

LOCATION—*At the University.*

Established by the Professors chiefly for the benefit of the students of the University, to whom its privileges are free. Clinics are held by the Professors on Wednesdays and Saturdays, from 12 M. to 2 P. M. There is also a daily clinic at the Dispensary.

During the year ending March, 1858, 4,500 cases were treated at the Dispensary, many of whom were prescribed for, or operated upon, in presence of the class. A limited number of beds are provided.

JEFFERSON COLLEGE HOSPITAL AND DISPENSARY.

LOCATION—*At the Jefferson Medical College.*

Established by the Professors chiefly for the benefit of the students of Jefferson College, to whom its privileges are free. Clinics are held by the Professors on every Wednesday and Saturday, from 12 M. to 2 P. M. There is also a daily clinic at the Dispensary. During the year ending March, 1858, 1,600 cases were brought before the class. A limited number of beds are provided.

PENNSYLVANIA COLLEGE HOSPITAL AND DISPENSARY.

LOCATION—*At the Pennsylvania Medical College.*

This Hospital and Dispensary have been established for the special benefit of the students of the College, to whom its privileges are free. Clinics are held by the Professors on Wednesdays and Satur-

days, from 12 M. to 2 P. M. A limited number of beds are provided. There is also a daily clinic.

LAZARETTO HOSPITAL AND QUARANTINE STATION.

This is situated on Tinicum Island, about twelve miles below the city, and has a resident physician, whose duties are similar to those of quarantine physicians generally.

FRIENDS' ASYLUM FOR THE INSANE.

This institution is under the care of the Society of Friends, and is located near Frankford. It was one of the first establishments of the kind in the United States.

Physician and Superintendent.—J. H. WORTHINGTON, M. D.

PRESTON RETREAT.

LOCATION—*In the northwestern part of the city.*

This was established by the late Dr. JONAS PRESTON, as a Lying-in-Hospital, but the commercial disasters of 1837 destroying the greater part of the fund set apart for its endowment, has delayed the execution of the design of the founder. The building is now occupied by *The Foster Home Association*.

We are informed that there is a fund in existence, independent of the above, for the purpose of establishing a

HOSPITAL FOR WOMEN,

and efforts are being made to unite it with the above Institution, which it is hoped will soon be done, as such an establishment is needed.

CHARITY HOSPITAL.

LOCATION—*Buttonwood St., below Broad.*

This Institution, which was opened for the reception of patients in 1857, is temporarily located as above. Its original plan embraces a wide range of usefulness, but as the enterprise is in its infancy, the intentions of its originators are not yet fully carried out. There is an Obstetric department, also a Dispensary connected with the Hospital.

MEDICAL BOARD.

President, A. C. HART, M. D.

P. B. Goddard, M. D., A. W. Griffiths, M. D.

W. H. Pancoast, M. D., J. L. Ludlow, M. D.

H. St. Clair Ash, M. D., W. E. Weatherly, M. D.

B. Price, M. D.,

Secretary, S. Updegrave, M. D.

Treasurer, Z. Ring Jones, M. D.

PHILADELPHIA LYING-IN CHARITY.

LOCATION—931 Race Street.

Physicians.

E. WILSON, M. D., J. M. CORSE, M. D.,
1339 Arch Street. 150 N. Tenth Street.

Four practical courses in Obstetrics are given each year, by the attending physicians, as follows: Course beginning on the 14th of February.

" " " 6th of May.

Dr. Wilson, *Lecturer*, Dr. Corse, *Clinical Instruction*. Course beginning on the 5th of September.

" " " 24th of November.

Dr. Corse, *Lecturer*, Dr. Wilson, *Clinical Instruction*

Each course continues about eleven weeks, and includes fifty lessons on the great principles of Obstetric Science, and the practical details of the art, and these, when the pupil is prepared by manipulations on the manikin, are verified by opportunities of observing cases.

The members of each class have in rotation the patients of the PHILADELPHIA DISPENSARY, PHILADELPHIA LYING-IN CHARITY and PHILADELPHIA NURSE SOCIETY, assigned them for their care and attendance, with the aid of the Assistants, if necessary, and under the supervision of the Principals.

In addition to the Obstetric course, a Clinic will be held every Saturday, at 9 o'clock A. M., for the treatment of DISEASES OF WOMEN.

Fee for the Obstetric Course, - - - \$15

Fee for Clinical Course, - - - 10

Apply at the Nurse's Home, 931 Race Street, or to either of the Physicians, as above.

Dispensaries

PHILADELPHIA DISPENSARY.

LOCATION—Fifth Street, below Chestnut.

Resident Physician—GEO. MARTIN, M. D.*Assistant* " THOS. ROWE, M. D.

Excellent opportunities are afforded at this Dispensary for the observation and study of diseases and minor surgery. It is the oldest Dispensary in Philadelphia, having been instituted April 12th, 1786. During the year 1858, 9,740 patients were treated, and there were 490 in the obstetric department. There were 35,126 prescriptions compounded.

Consulting Physicians and Surgeons—Drs. William Darrach, H. L. Hodge, G. W. Norris, and W. W. Gerhard.

Obstetric Physicians—Drs. E. Wilson, J. M. Corse.

There are six attending physicians and surgeons.

Apply at the Dispensary.

NORTHERN DISPENSARY.

LOCATION—No. 106 Spring Garden Street.

Resident Physician—J. M. SLOCUM, M. D.

Instituted October 1st, 1816. This Dispensary affords an excellent opportunity for the study of pharmacy and minor surgery.

During the year ending December 31st, 1857, 6,973 patients were admitted to the care of the Dispensary, and 12,600 prescriptions compounded; and in the Lying-in Department 41 patients were attended.

Consulting Surgeons—Drs. P. B. Goddard, D. Gilbert, and R. P. Thomas.

Consulting Physicians—Drs. S. Jackson, C. Noble, I. Remington, M. M. Levis, J. R. Bryan, and W. Mayburry.

Consulting Physicians to the Lying-in Department—Drs. H. L. Hodge, B. S. Janney, C. D. Meigs, T. H. Yardley, and J. Rhein.

There are eight attending Physicians and Surgeons throughout the District.

Apply at the Dispensary.

MEDICAL DEPARTMENT OF THE HOUSE OF INDUSTRY.

LOCATION—Catharine Street, above Seventh.

Resident Physician, ————.

This was formerly the Moyamensing Dispensary, but was shortly merged with the Moyamensing House of Industry, and has rendered much service to the poor.

A large number of cases have been attended, both at its daily clinics and by its attending physicians. That portion of Philadelphia below South street comprises its limits, which is divided into four districts, each attended by a Physician. Applications for attendance are made at the Dispensary, to the Resident Apothecary, who directs them to the proper attendant.

THE GERMAN DISPENSARY.

Noble Street, above Fourth.

Has been in existence about one year. The object of the Institution is to give medical attendance to the German portion of the population, particularly to those who are not sufficiently acquainted with the English language, to make themselves understood by the Physicians of other Dispensaries. The German Dispensary is supported by voluntary contributions, and is deserving of the sympathy and liberality of our citizens. Since its opening three thousand cases have been treated.

The Attending Physicians are Drs. Tiedeman, Beeken, Rattenman, Schrotz and Fischer.

Special Lectures.

PARRISH'S SCHOOL OF PRACTICAL PHARMACY.

EDWARD PARRISH, 800 Arch Street, Philadelphia.

On commencing the eleventh Winter Course of Instruction, the proprietor has made arrangements for the separation of the lectures from the practical course; though these will be conducted simultaneously, the lectures in *College Avenue*, and the practice, as heretofore, at the laboratory, No. 800 Arch street.

The practical course will be under the direction of John M. Maiself, a competent Chemist and Pharmacist, who will also take a small class of students in *Practical and Analytical Chemistry*.

Every effort will be made to sustain the former reputation of this school, and to teach thoroughly those important practical parts of *Materia Medica* omitted in the college courses.

FEES.

For Lectures on Pharmacy and Mat. Medica,	\$7 50
For full practical course on Pharmacy,	15 00
For laboratory Course on Chemistry, per month, - - - - -	25 00

PATHOLOGICAL ANATOMY, AND THE CLINICAL USE OF THE MICROSCOPE.

Lecturer—J. J. WOODWARD, M. D., N. E. corner of Tenth and Vine streets.

Dr. Woodward will commence his sixth course of lectures on the above subjects, at his house, N. E. corner of Tenth and Vine sts., about the middle of October, 1859.

This course treats of the *Clinical use of the Microscope, of Urinary Deposits, of the Minute Anatomy of the several Pathological Conditions*, and of so much of the microscopical anatomy of the healthy tissues as is necessary to an understanding of the morbid processes.

It is the object of the course to impart to the class such a knowledge of the application of the microscope to practical medicine as to render it a valuable aid in professional pursuits.

Fee for the course, - - - \$15 00

PRACTICAL INSTRUCTIONS IN MICROSCOPICAL ANATOMY.

DR. H. D. SCHMIDT gives a course of instruction in Microscopical Anatomy, in a course of three months, comprising twenty-six lessons.

For further information apply to

H. D. SCHMIDT, M. D.,
148 N. Tenth St., or at the Anatomical
Rooms of the Univ. of Pa.

PRACTICAL INSTRUCTION IN AUSCULTATION AND PERCUSSION, IN CONNECTION WITH DISEASES OF THE CHEST.

DR. GERHARD will commence his course at the Pennsylvania Hospital on the 1st of November. Daily visits to the wards will be made on Monday, Tuesday, Thursday and Friday of each week. On Wednesdays and Saturdays the regular public clinical lectures are given.

Fee for the private course, - - - \$25

(Students are required to have the Hospital ticket.)

DISEASES OF THE LUNGS AND HEART.

ROOMS—Back of Jefferson College.

Lecturer—W. E. WEATHERLY, M. D., S. E. corner of Eleventh and Spring Garden streets.

Dr. Weatherly will deliver, during the year, two courses of lectures on the various diseases, both functional and organic, of the lungs and heart.

The first course commences April 1st, the second, October 24th, 1859.

These Lectures will be amply illustrated by Drawings, Plates, Pathological Specimens, &c.

Clinical Instructions will be included in, and constitute a part of the above course; and will be held at the Charity Hospital, on Wednesdays and Saturdays, from 11 till 12 o'clock, when each student will be required to make a critical examination of the patients under the eye of the teacher, and give, as far as he is able, from the physical and rational signs, a correct diagnosis, prognosis, treatment, etc., of the suspected disease. These clinics will not interfere in any way with those of the colleges.

At the end of the course, a certificate of proficiency will be awarded to each member of the class desiring it.

FEE, \$20.

MEDICINE AND SURGERY OF THE EYE AND EAR,

ROOMS—in College Avenue.

Lecturer—L. TURNBULL, M. D., No. 1208 Spruce Street.

Lectures delivered from October to March, and illustrated by cases, drawings and preparations. Advanced members of the class are furnished with Acute and Chronic cases from the eye and Ear department of the Howard Hospital, and the private practice of the Lecturer, under his supervision. A public clinique is also held twice a week, at the Hospital, being the only clinique in Philadelphia for diseases of the Ear.

Instruction is given on the use of the Ophthalmoscope, Otoscope, etc.

(Dr. T. has just returned from Paris, where, at

much trouble and expense, he provided himself with some of Auzoux' celebrated models of the Eye and Ear, for purposes of demonstration.)

FEE, \$15.

PRACTICAL COURSE ON DISEASES OF THE LUNGS AND HEART.

Rooms—In College Avenue.


Lecturer—J. DaCosta, M. D., No. 212 South Eleventh street.

All physical signs are *experimentally* demonstrated. Patients are introduced, lesions diagnosticated and explained, and, as the course advances, the members of the class will be required to diagnose for themselves. The clinical meetings are held twice a week.

There are three courses given annually—one commencing early in April, one the last week in August, and one in November.

This course is not connected with any of the schools.

FEE, \$20.

 The lecture introductory to the next course, will be given on the 20th of October.

OPERATIVE SURGERY.

Rooms—College Avenue Anatomical School, corner of College Avenue and Tenth street.

Lecturer—W. S. Forbes, M. D., 257 South 17th street.

This course begins the 2d of November, and embraces all the important operations and practical details in major and minor Surgery, including the application of all the bandages and splints used in the treatment of fractures and dislocations.

The Student will enjoy the use of instruments, and every facility will be given to perform all the operations in the Dissecting Room.

FEE FOR THE COURSE, \$15.

This course is entirely independent of the Lectures on Anatomy.

Gentlemen who attend both courses (*Operative Surgery and Practical Anatomy*), will be given, in addition, a rigid examination of an hour twice a week, in connection with the Lectures on Anatomy and Surgery of the Jefferson Medical College.

Fee for the Lectures on Anatomy and Operative Surgery, including the "Quiz," twice a week, \$25.

For further information apply to the Lecturer, Dr. Forbes, or to the Demonstrator, Dr. Hoyt.

SURGICAL ANATOMY AND OPERATIVE SURGERY.

Lecturer—S. W. Gross, M. D., S. E. corner of Eleventh and Walnut sts.

This course of instruction will be commenced on the 1st of November, and will be continued throughout the *Winter Term*, three lectures being delivered each week.

Every important operation will be performed by the lecturer, on the subject, and the Surgical Anatomy of the particular part will be fully demonstrated by dissections, dried and wet preparations, and plates.

A limited class will be formed for *practical instruction*, each member of which will be required to perform the various operations under the immediate supervision of the lecturer. The necessary instruments and material will be furnished.

The Fee for the course of lectures alone will be \$10, that for the practical course being \$25. The members of the latter class will have the privilege of attending the lectures, free of charge.

For further information apply to Dr. S. W. Gross, S. E. corner of Eleventh and Walnut, or at the Clinic of the Jefferson Medical College.

OPERATIVE SURGERY.

Rooms—On College Avenue, entrance from Tenth st.

Lecturer—JOHN H. BRINTON, M. D., 1007 Walnut street.

Dr. Brinton will commence his 21st Course of Lectures on Operative Surgery at his rooms in the Philadelphia School of Anatomy, College Avenue, Tenth street, above Chestnut, on Wednesday, October 19th, 1859.

The course is fully illustrated by the *recent subject* by dried and wet preparations, by wax models, casts and drawings. The lectures will extend over a period of four months, and will comprise a full series of demonstrations in Operative Surgery, Surgical Anatomy, the Treatment of Fractures, and Bandaging. Demonstrations adapted especially to the wants of gentlemen who may become candidates for admission into the Army or Navy.

The arrangement of the Practicings will be as follows:

Those of the class desiring to operate will be formed into sections of five, each one of whom will be furnished by the lecturer with the necessary instruments, and will operate under his supervision.

A supply of subjects can be obtained on the usual terms.

FEE FOR THE COURSE, \$10.

Lectures preliminary to the above course will be given during the first week in October.

OPERATIVE SURGERY.

Rooms—*Sansom street, below 10th.*

Lecturer—W. H. PANCOAST, M. D., 1032 Chestnut street.

Dr. Pancoast will begin his winter course on "Operative Surgery," Oct. 12th. This course will be of four months duration, and comprehends fifty lectures. All the usual operations will be performed before the class. Instruction in practical bandaging and the application of surgical apparatus will be given.

FEE, \$15.

Rooms—*Sansom street, below 10th.*

Lecturer.—HUNTER H. MCGUIRE, M. D.

Dr. McGuire will open his course of practical surgery on the 11th day of October, and continue throughout the winter session. All the practical details of major and minor surgery will be presented, and members of the class will have opportunities to operate, free of extra charge.

FEE, \$15.

MEDICAL CHEMISTRY.

Rooms—*Sansom street, below 10th.*

Lecturer—F. E. LUCKETT, M. D.

Dr. Lockett will commence his winter course of lectures on this subject in its relations to Toxicology, Therapeutics and Medical Jurisprudence, early in October. Three lectures will be given weekly for a series of sixteen weeks. The entire course will be illustrated by experiments, diagrams, &c.

FEE, \$15.

PRACTICAL OBSTETRICS.

Rooms—*In College avenue; entrance on 10th street.*

Lecturer.—R. A. F. PENROSE, M. D. 1133 Spruce street.

Dr. Penrose will commence a course of instruction in Practical Obstetrics on Monday, October 17th, in the rooms of Dr. Agnew, in College avenue, Tenth street, above Chestnut.

The course will consist of Lectures upon the Mechanism of Labor, combined with practical instructions upon the manikin and subject, of the most minute character.

Students will also have an opportunity, under the immediate supervision of the Lecturer, of rendering themselves familiar with every operation and manipulation necessary in conducting a labor.

Obstetrical patients will be furnished to such members of the class as shall be sufficiently advanced to take charge of them.

Fee for the entire course, \$15.

PRACTICAL OBSTETRICS.

Rooms—*Rear of Jefferson College.*

Lecturer—Wm. B. Atkinson, M. D., 215 Spruce street.

By this course the student is enabled to obtain a thorough and practical knowledge of Midwifery. The lectures are thoroughly illustrated by the Manikin, etc. Each student is furnished with a number of cases, of which he takes charge, under the supervision of the lecturer.

FEE, \$15.

PRACTICAL COURSE ON OBSTETRICS.

Lecturer—Wm. D. Hoyt, M. D., N. W. corner of Seventh and Spruce streets.

Consulting Physician—W. V. Keating, M. D., 283 South Fourth street.

Dr. Hoyt will commence his practical course on Obstetrics on the 1st of October.

The course will embrace a series of Lectures on Practical Midwifery, Exercises on the Manikin, etc.

Obstetrical cases will be furnished to advanced students and graduates, which they will attend under his supervision.

Fee for the entire course, \$15.

LECTURES ON DENTAL PRACTICE AND DISEASES OF THE MOUTH.

Rooms—*In College Avenue, at the Philadelphia School of Anatomy.*

Lecturer—Jas. E. Garretson, M. D., D. D. S., No. 40 North Sixteenth street.

In the first part of this course it will be the object to familiarize the student of medicine with the details of dental practice proper, and with the various dental relations as they in any wise pertain to general practice.

The second part will embrace the Diseases (Surgical and Medical) of the Mouth.

In minute and practical detail, will be taken up the morbid conditions of the Antrum Highmoreanum; the varieties of Odontalgia; Dentition, as it affects the child and the adult; Fractures of the Maxillary Bones, with the construction and application of apparatus, particularly as comminuted cases are concerned; Treatment of Palatine Defects; the various diseases of the soft parts; Ptyalism, Stomatitis, Tumefactions, Scurvy, Periosteal, Scrofulous, Venereal, and other abscesses; Lymph Deposits, Trismus, etc. The surgical consideration of Caries, Necrosis, Exostosis, and the variety of Tumors; Resections; the reduction of Dislocations, etc.; Causes and Treatment of False Ankylosis; the employment of Anæsthetics, etc.

Tickets \$10.

Office Instruction

AND WINTER EXAMINATIONS.

C. PENDLETON TUTT, M. D., 140 South Eleventh street.

W. L. WELLS, M. D., 216 South Ninth st.

ROOMS—No. 9 St. Stephen's Place—Entrance from College Avenue.

The course of instruction will embrace a full series of examinations and demonstrations on the following branches, in connection with the lectures delivered in the Medical Department of the University of Pennsylvania:

By Dr. Tutt—Anatomy, Surgery, and Obstetrics.

By Dr. Wells—Practice of Medicine, Materia Medica, Chemistry, and Physiology.

Obstetrics will be taught from the Manikin, and particular attention will be given to the manual and instrumental operations of this department.

Materia Medica.—A full set of specimens has been provided, and all the important reactions in Chemistry will be demonstrated.

Fee, \$30.

They will also take students for private office instruction, for the whole or a part of their course of study.

Especial attention will be given to preparing students for the Medical Board of the Army and Navy.

S. W. GROSS, M. D., S. E. corner of Eleventh and Walnut streets.

MORRIS J. ASCH, M. D., 417 Spruce street.

ROOMS—In the Rear of Jefferson Medical College.

Examinations are held daily in all the branches taught in the Jefferson Medical College, commencing on the 23d of October. Near the close of the session a review of the entire course is given. The examinations are fully illustrated by surgical and anatomical preparations, a cabinet of materia medica, etc.

Exercise will also be given in writing prescriptions.

Fee, \$30.

Dr. Asch—Physiology, Materia Medica, Obstetrics, Practice.

Dr. Gross—Chemistry, Anatomy, Surgery.

C. S. BISHOP, M. D., No. 334 North Tenth st.

J. J. WOODWARD, M. D., N. E. cor. Tenth and Vine, or at the Surgical Dispensary of the University of Pennsylvania.

ROOMS—N. W. corner of Chestnut and Ninth Streets.

Examinations are held daily on all the branches taught in the University of Pennsylvania, commencing

early in October, and are fully illustrated by models, specimens, drawings, etc.

The class, besides the usual quiz, will have the privilege of attending, without additional fee, a series of *Review Examinations*, commencing on the third Monday in January, and continuing daily until the examination for degrees. Although this arrangement necessitates a quiz twice a day during the last six weeks of the session, yet it is believed the advantages resulting from thus presenting anew the subjects studied early in the winter, will more than repay the additional labors of the student.

Dr. Bishop—Materia Medica, Obstetrics, and Surgery.

Dr. Woodward—Anatomy, Physiology, Practice, and Chemistry.

Fee for the full course, - - \$30 00

" " a single branch, - - 5 00

Drs. BRINTON and DA COSTA will receive office students for the whole or a partial period of their study.

Those entering the office will have access to a library, to a cabinet of materia medica, and also to one of Anatomy. They will be regularly examined during the summer and winter, and will be instructed in bandaging, the application of surgical apparatus, the use of the microscope, etc.

Facilities will also be afforded students of attending the summer lectures at the *Philadelphia Association for Medical Instruction*; and they will have opportunities of seeing patients under the supervision of the subscribers.

Special attention will be paid to the preparation of candidates for the Army and Navy.

For further information apply to

JOHN H. BRINTON, M. D., 1007 Walnut street.

J. DA COSTA, M. D., 212 south Eleventh st.

J. J. LEVICK, M. D., 1109 Arch street.

WM. HUNT, M. D., 431 Arch street.

R. A. F. PENROSE, M. D., 1133 Spruce street.

Drs. Levick, Hunt and Penrose, continue to receive students of medicine for the whole or part of their course of study.

Gentlemen becoming their pupils have access at all times to their rooms on Jayne street, (opposite the University,) which are furnished with a cabinet of materia medica, chemicals, anatomical, surgical, and obstetrical preparations, etc.

During the winter months, examinations are held daily on the various subjects of the lectures in the University of Pennsylvania, as follows:

Dr. Levick—Practice and Materia Medica.

Dr. Hunt—Anatomy, Institutes and Surgery.

Dr. Penrose—Chemistry and Obstetrics.

Fee for the winter examinations, \$30.

Besides that of the winter session, regular instruction will be given during the summer months (with the usual vacation) on all the important subjects belonging to a thorough medical education.

W. E. WEATHERLY, M. D., S. E. Corner 11th and Spring Garden streets.

D. A. Mathews, M. D.

Rooms—*In Medical street, back of Jefferson College.*

Examinations are held daily on the various branches taught in Jefferson Medical College, commencing about the middle of October. The course is fully illustrated by models, drawings, specimens, etc. Special attention is given to Chemistry and Obstetrics.

Dr. Weatherly—Practice of Medicine, Materia Medica, Obstetrics, Physiology.

Dr. Mathews—Chemistry, Surgery, Anatomy.

Review Examinations of candidates for graduation commencing on the first of January, will continue daily until the close of the session.

Recapitulatory Lectures will be given on the lectures of each preceding week, and will be included in, and constitute a part of, the above course.

FEE, \$30.

JAMES M. CORSE, M. D., 150 north Tenth street.
W. H. HOOPER, M. D., N. W. corner of 13th and Sansom streets.

Rooms—*116 north Ninth street, above Arch.*

Examinations are held daily on the various branches taught in the University of Pennsylvania, beginning about the 21st of October. The course is illustrated by anatomical and surgical preparations, by a cabinet of materia medica, manikins, etc.

FEE, \$30.

Dr. Corse—Obstetrics, Institutes, Anatomy and Surgery.

Dr. Hooper—Practice, Materia Medica and Chemistry.

F. E. LUCKETT, M. D.

HUNTER H. MCGUIRE, M. D.

WM. H. PANCOAST, M. D., 1182 Chestnut Street.

Rooms—*In Sansom street, below Tenth.*

Drs. Luckett, McGuire and Pancoast, will commence their course of daily examinations in connection with the lectures delivered in the Jefferson Medical College, early in October.

Recapitulatory Lectures will be delivered on the most important branches, and will constitute part of the instruction. Ample illustrations will be made in every department.

FEE, \$30.

J. CHESTON MORRIS, M. D., 1435 Spruce street.

R. BOLLING, M. D., 256 South Twelfth street.

J. T. DARBY, M. D.

Rooms—*College avenue, entrance on Tenth Street.*

Drs. Packard and Morris having dissolved their connection, Dr. Morris has associated with himself Drs. Bolling, of Va., and Darby, of S. C., for the purpose of conducting examinations in connection with the University of Pennsylvania.

Recapitulatory Lectures will be given on all the branches, as well as Special Courses on Diseases of the Skin, Microscopic Anatomy, Physiology, &c., to those who may desire it. Clinical advantages will also be afforded.

Fee for examinations, \$30.

Office students received for the entire or partial course. Candidates prepared for the Army and Navy.

Drs. Bolling and Darby being Demonstrators at Dr. Agnew's "Anatomical Rooms," will be able to afford special facilities in this branch.

THEODORE A. DEMMÉ, M. D., 538 North Fourth Street.

JAMES M. BOISNOT, M. D., 822 Marshall Street

Rooms—*244 South Ninth Street, first door north of Pennsylvania College.*

Students are received for a part or the whole of their course of studies.

Examinations are held daily on all the branches taught in the Pennsylvania Medical College.

By means of Diagrams, Anatomical Preparations, and a carefully selected Materia Medica Cabinet, every facility will be afforded to the class in the prosecution of their studies.

FEE \$30.

OLIVER A. JUDSON, M. D., No. 1135 Spruce St.

CHARLES P. TURNER, M. D., No. 235 South Eighth

WILLIAM D. HOTT, M. D., N. W. Corner Seventh and Spruce Streets.

Rooms—*In College avenue.*

Examinations are held daily on the various branches taught in the Jefferson Medical College, beginning early in October. The course is illustrated by Anatomical and Surgical preparations, by a cabinet of Materia Medica, etc.

FEE, \$30.

R. J. DUNGLISON, M. D., Corner of Tenth and Sansom Streets, opposite Jefferson Medical College, or at 1116 Girard Street.

Rooms—*Opposite Jefferson Medical College.*

Dr. Dunglison will commence his course for the preparation of Students for graduation, with the

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ORIGINAL DEPARTMENT.

Communications.

ANATOMY

IN ITS RELATIONS TO

MEDICINE AND SURGERY.

By D. HAYES AGNEW, M. D.,

Lecturer on Anatomy; Surgeon to Philadelphia Hospital, etc.

No. 13.

LATERAL FACIAL REGION, (continued.)—The secretion of the parotid, as well as the other salivary glands, is influenced much by causes of an emotional character; thus, it is diminished or even entirely suppressed by circumstances exciting fear. This fact has been taken advantage of to detect persons suspected to be guilty of some criminal act. A medical friend informed me that while on a visit to the sea side during the summer of 1858, a quantity of valuable property was purloined from the proprietor of the house where he lodged. There were some circumstances attending the occurrence which made it probable that one of the servants was the guilty party, though they all disavowed any knowledge of the theft. He suggested that they should be all summoned in a body into a private apartment, which being done, he proceeded to inform them he would be sure to point out the guilty person, and that escape was impossible. Ordering some rice, he placed a spoonfull in the mouth of each, directing that it should be chewed and swallowed. One after another masticated and transferred the bolus to his stomach with the exception of one, who, after sundry wry faces and elongations of the neck in fruitless attempts at swallowing, at length was obliged to desist. The truth was, a consciousness of guilt and the terror of detection had arrested the salivary secretion so completely that he was unable to moisten the grains sufficiently to make them cohere, rendering their deglutition impracticable. He ejected them accordingly from his mouth, perfectly dry, and confessed the theft.

The explanation must be looked for in the depressing effects of fear upon the nerves, so that their excito-secretory action is temporarily suspended.

High states of vascular action will likewise produce similar results, as an exemplification of which, we have the dry mouth in fevers attended with much arterial excitement.

I am disposed to believe, from observation, that the parotid, as well as the other salivary glands, are larger in tobacco chewers than in those not given to such a habit, which is not extraordinary when the constant excitation to which they are thus subjected is considered, inducing thereby an actual hypertrophy.

The mass of fat between the buccinator and masseter muscles gives a degree of rotundity to this part of the face; its disappearance during attacks of wasting disease produces the hollow cheek. As it is packed round the parotid ducts it serves also to relieve them from pressure by the masseter muscles during mastication, and offers no obstacle to the flow of their contents into the mouth at a time when it is required.

Muscles.—The region of the face under consideration contains muscles of *mastication* and *expression*.

Extending from the zygomatic arch to the base of the lower jaw is the masseter muscle, covering, therefore, the ramus of the latter bone. It consists of two planes of fibres, which have somewhat opposite directions. The superficial part arises from the anterior two-thirds of the zygoma, and from the malar prominence of the superior maxillary, and passing backward, is attached to the angle and base of the inferior maxillary bone. The deep portion arises from the inner edge and lower border of the zygomatic arch, its whole length, and taking a forward course, is connected to the upper part of the outer surface of the ramus. It is a muscle of great power, containing a large intermixture of tendinous structure. Its motor and sensory nerves come from the 5th pair.

Practical Remarks.—Covering up the posterior half of the base of the lower jaw, as the masseter does, it will defend this portion of the bone against fracture. In fractures of the

zygomatic arch, displacement upward or downward to any extent is prevented by the attachment of the temporal aponeurosis above, and the masseter below. When driven in, if comminuted, the temporal muscle may be wounded, (being inserted beneath it,) and mastication rendered impossible. The superficial portions of the masseters will aid in luxation of the inferior maxillary bone, as the condyles are in advance of the axis of their fibres. The deep portions, on the contrary, being directed forward, will assist in reduction by dragging the condyles backward when the bone is properly depressed.

Like the temporal, the masseter muscles are exceedingly irritable, and with them produce the chattering of the teeth. This is produced by their motor and sensory endowments proceeding from the same (5th) pair, the sympathies and impressibility of which are so extensive and extreme. The contraction of the masseter produces in part a degree of immobility in the temporo-maxillary articulation, distinguished as *false ankylosis*, hence wounds or inflammatory conditions of the muscle are attended or followed by stiffness and rigidity of the jaws. The hard and stony feel of this part of the face in lock-jaw is in consequence of the spasmodic contraction of its fibres.

When the jaws have been fixed for any considerable length of time, the muscle becomes atrophied, and when division of its fibres becomes necessary for the relief of ankylosis, it should be done in the upper part of the muscle, that the deep plane of fibres may be acted upon. In such operations the position of Steno's duct must not be overlooked, (see fig. 17,) nor that of the transverse facial artery.

Fig. 18.



If a probe be passed downward and for-

ward under the temporal aponeurosis between it and the muscle, it will appear at the anterior edge of the masseter, (see fig. 18.) An abscess may take the same direction, and will tend toward the cutaneous surface rather than the cavity of the mouth, because it will still be exterior to the buccinator fascia.

Muscles of Expression.—From the anterior part of the base of the lower jaw to the angle of the mouth there extends a triangular muscle, "the depressor anguli oris." From the upper lip to the lower margin of the orbit runs the "*levator labii superioris proprius*," and from the angle of the mouth run three muscles, the two lower ones to the malar bone, the *zygomaticus major* and *minor*, and the upper ones to the canine fossa, below the infra-orbital foramen, through which emerges the infra-orbital nerve, the "*levator anguli oris* or *caninus*," and last, in this region, the *buccinator*, arising from the upper and lower jaws, and posteriorly from the pterygo-maxillary ligament, is inserted into the commissure of the mouth, (see fig. 17.)

Practical Remarks.—Those lines which confer individuality of expression are so much connected with the muscles of the face, that in operations upon this region it is better when it can be done, not to detach or displace them from their connections of origin and insertion, or where this is impracticable to replace them in their natural directions in the adjustment of the proper dressings.

Irregularities of Movement affect these muscles occasionally as manifested by twitchings, and which are to be referred either to functional or structural changes of the portio dura nerve, or the part of the encephalon from which it proceeds. The numerous communications of the portio dura with other nerves, will serve to show how readily these movements may be symptomatic of trouble in other and distant parts, as well as furnish an explanation of many other phenomena. We may instance a few as examples out of very many which suggest themselves. Unpleasant sounds often excite contortions of the face; thus a man of refined and cultivated musical ear will manifest the most painful expression of face

in listening to the performance of a badly instructed orchestra. The explanation is found in the communication between the portio dura and auditory nerves. Substances attended with unpleasant taste excite wry faces by the connection of this nerve (facial) with the glossopharyngeal; and disorder of the stomach may produce irregular movements through the relation subsisting between it and the pneumogastric.

Facial Paralysis, is the loss of power over these muscles, in consequence of which those of the sound side draw the face awry. If the paralysis affect only the movement it involves the portio-dura (facial) nerve; if the sensation, the tri-facial, or 5th pair.

In cases of facial palsy the angle of the mouth is often seen to be drawn down. This is not done by the proper depressor which is supposed to be implicated with the other muscles, but by the angular fibres of the platysma myoides which receives its nerve supply from a different source. In the adjustment of wounds care should be observed to do so, parallel with the course of these muscles that there may be as little tendency to gap as possible, and that breaks in the natural topographical lines of the face may be avoided.

With regard to these muscles as organs of expression, I shall omit any remarks until those of the remaining regions have been described

Blood-Vessels.—The facial vessels are not very large, but are remarkable for their extensive inosculations, communicating with the internal maxillary through the anterior mental branch of the inferior dental artery which reaches the face from the anterior mental foramen; with the internal maxillary again through the infra-orbital artery as it emerges from the infra-orbital foramen; with the external carotid by the transverse facial; and with the internal carotid at the inner angle of the eye by the nasal branch of the ophthalmic.

Facial Artery.—This is a branch of the external carotid; it leaves the neck and reaches the face in front of the inner edge of the masseter muscle between it and the depressor anguli oris separated from the bone

only by its periosteum, and covered by the skin, superficial fascia, platysma myoides muscle, and the deep fascia. Ascending along the outer edge of the mouth it passes beneath the zygomatic muscles and ends at the inner angle of the eye, communicating there with the nasal, frontal, palpebral and corresponding vessels of the opposite side. The vessel as well as its branches have a serpentine form.

In its course the facial artery gives two or three branches to the masseter and buccinator muscles; a branch to the lower lip the *inferior labial*, which passes beneath the depressor anguli oris muscle; a branch to the border of the lip the *inferior coronary*, passing likewise beneath the same muscle; a third to the upper lip *superior labial*; a fourth to the side of the nose *lateralis nasi*, and finally terminates in the *angular artery*.

The *Facial Vein* commences at the inner angle of the orbit by the union of the frontal, angular and palpebral veins, receiving accessions as it descends the face; it is placed some distance to the outer side of the facial artery, in the upper part of the face, but approaches it as it descends, until on the lower jaw it is placed close along side between it and the inner edge of the masseter muscle.

Practical Remarks.—The extensive anastomoses of the facial artery may render it necessary in wounds of the face to secure both ends of the injured vessel. Its tortuous shape is well suited to the ever varying dimensions of the soft parts. The main trunk of the facial resting as it does against the inferior maxillary bone, can be effectually compressed so as to control very perfectly the circulation, and may be taken advantage of in operations upon the face. Its situation at the anterior edge of the masseter will most accurately conduct the surgeon to the vessel should circumstances require its ligation. The vascular anastomoses at the inner angle of the orbit make it an excellent locality for the application of leeches. The beautiful capillary network which underlies the skin of the cheek, enriching it with youthful bloom, is supplied by the branches of the facial. The degree of color is wonderfully controlled by emotive

states of the individual, through the sympathetic nerve; hence the heightened tint in blushing, shame, and rage.

There is also a glow of the cheek, which reminds us of roses painted upon tombs. This often lends an unusual degree of interest and deceitful beauty to the countenance, calculated to disarm friends of all apprehension, and excite feelings of hope. The bloom we allude to is that which accompanies phthisis, and many other exhaustive affections, and reveals to the physician too often a condition of things which fairly defies the agencies at his command. In pneumonia a peculiar flush is occasionally witnessed not only upon the cheek, but even across the nose. All of these changes in the condition of the blood vessels, must be referred to the connection between the pneumogastric and sympathetic nerves, enabling disease in the lungs to react upon the vessels of the face.

Powerful Mental Impressions a cause of Deformity of the Fœtus in Utero.

By B. WOODWARD, M. D.,
Of Galesburg, Illinois.

In the REPORTER for August 27th, is an article by Dr. Zeigler on "Arrest of Development in the Uterus."

It has become so fashionable to decry, as "old fogys," those who have faith in the power of mental impressions of the mother over the fœtus in utero, so as to cause deformity, that in some circles it is hardly safe to profess faith in such power. I have never been able to see anything so very unreasonable in the doctrine as some profess to think it. I beg leave to give you the history of a case from my "notes," and also a case as detailed to me.

From notes:—"March 12, 1854; to-day confined, Mrs. C. Rowe, mother of two previous children; labor tedious; child a male almost every part deformed. The head was drawn on one side and the cheek adherent to the right shoulder; no ear on that side; arms, hands and legs deformed; one foot drawn up and adherent to the side of the leg; anus imperforate; penis rudimentary. The child

made a moaning noise, and lived about an hour. Could not get an examination after death.

Remarks.—Mrs. Rowe called upon me when she was in the third month of gestation, and stated that "she feared she had marked her infant." She had been visiting a friend, and while there, a child had a fit, in which she was very much distorted, and had frightened Mrs. R. so much that she feared her babe "would look as the child did." I tried to reason her out of it, but she remained in the same state of mind till her confinement.

Case 2. Mr. W. showed me his abdomen, across which was a mark having every appearance of a large rattle-snake. It had the regular spots of the snake, and the skin over it was actually scaly. The account he gave me of it was that "during the pregnancy of his mother, his father, to frighten her, threw at her the body of a rattle-snake he had just killed; it struck her across the belly and threw her into a fit, and when he was born he had this mark."

My own belief is, that in both the above cases, and in Dr. Zeigler's case, the mental impression of the mother was the cause of the deformity.

Illustrations of Hospital Practice.

PENNSYLVANIA HOSPITAL.

SEPT. 17TH.

Service of Dr. J. Forsyth Meigs.

(Reported by Mr. J. B. Hayes.)

Urinary Deposit.—A specimen of copious urinary deposit was exhibited to the class, which had the appearance of pus; but subjected to the tests of heat and of nitric acid, was found to consist mainly of urates and phosphates, with a little mucus. Not a trace of pus could be detected by the microscope.

It was shown in order to impress on the minds of the class the necessity of careful and thorough examination in forming a diagnosis. Without a correct idea of the nature of this deposit, one might jump to the conclusion that the patient was laboring under pyelitis, or abscess of the kidney. The specimen came from an old lady, nearly eighty years of age, who had, six years ago, a severe attack of pneumonia of the upper lobe of the right lung, and

who, after getting entirely well, was attacked late last spring with chronic rheumatism. About two months ago she was seized with a cough, hectic fever, emaciation, and has now a large vomica under the right clavicle, in all probability of tuberculous origin.

Cirrhosis of the Liver.—This patient, a male, aged 44 years, was in the hospital last winter, for ascites, under the charge of Dr. Wood. He was discharged, cured, last December, and remained well five months.

He was re-admitted eight weeks ago, with extensive ascites, and anasarca of the lower extremities, and in spite of active diuretics, and iron, these both very much increased. The history of the case, the absence of renal or cardiac disease, and the character of the symptoms, lead to the conclusion that cirrhosis of the liver is the cause of the dropsy.

The diaphragm was pressed up into the chest so far, as greatly to impede his respiration, he became so distressed that he could not lie down, and he was troubled with a cough, the result of bronchitis, caused by pressure on the vessels, in all probability. His heart was elevated above the left nipple, its apex was felt to beat in the third interspace. His symptoms were so urgent that we thought it necessary to tap him. This was done last Tuesday, and 30 pints of fluid were drawn off. He was greatly relieved by the operation. His cough is gone, and the distension of the abdomen is much less. The heart is even now unnaturally displaced.

Dr. M. here called the attention of the class to the statement of M. Sappey, who says that in the contracted state of the liver, resulting from cirrhosis, the current of the blood in the superficial abdominal veins is downward. There was here proof to the contrary. On emptying one of the enlarged veins by pressure with the fingers, and removing the pressure from below, it was observed to fill very rapidly, whilst it filled very slowly when the pressure was kept up below, so as to oblige it to fill from above downward.

The cream of tartar, which he had been taking, was continued, and he was allowed good diet.

Case of doubtful diagnosis.—Probable dilatation of bronchi, with remains of old pleurisy.

The patient was a girl, 13 years of age, admitted to the hospital on the 15th of June, with apparent tuberculous disease of the lungs. There seems to have been no predisposition, in her case, to tuberculosis, the mother alone of the family having died, after a short illness, of some fever, some years ago. The father, as also four brothers and two sisters, were all living in good health, and were all older than herself. The patient enjoyed good health till she was 11 years old. She then had an attack of

measles, followed by sharp and violent pains in the left side, with a cough which has remained to this time. She had, on one occasion, a slight hemorrhage, about a wineglassful, and has never menstruated.

When Dr. M. took charge of the wards, on the first of August, he supposed, from the character of the local symptoms, that this case was one of slow phthisis. At this time, however, he was forcibly impressed with the want of relation between the local physical signs and the general condition of the patient. The child had a daily attack of hectic about the middle of the day, which lasted but a few hours, leaving her free of fever at night. This circumstance led to the administration of quinine to the amount of twelve grains, in divided doses, before twelve o'clock. In a few days the fever was broken up, and did not return. The rapid dissipation of the daily fever under this treatment, led to a more thorough examination of the case, under the hope that a more cheering opinion of the nature of the case might be arrived at.

The patient, as the gentlemen could see for themselves, was not emaciated; on the contrary, she was quite up to the average, perhaps a little beyond the average of most growing girls in this country, as to her embonpoint. Her neck and shoulders were round and full, as were also her limbs. There was no flattening nor hollowing whatever about either clavicular region, and this, let it be remarked, after two years of ailing. There was no dyspepsia. There was not now, and there had been no diarrhoea. There was no sweating at night; there was no clubbing of the finger ends. These conditions were all opposed to the theory of phthisis, and yet the local physical signs were so much like those of tubercular deposit, that it was difficult to explain them under any other view. To these Dr. M. next called attention.

Upon *percussion*,—performed before the class—a great difference was observed in the two sides. Under and above the *left* clavicle, flat; right side, sonorous. Over the whole of the *left* side, before and behind, marked dullness, most decided over the upper regions; right, perfectly clear.

Auscultation.—Under left clavicle, strong, bronchial respiration, almost cavernous, with moist rattles; behind, at the root of the lung, a cavernous respiration, with mucous rales; right side, puerile respiration at the summit. This lung breathes in a supplemental way; in other respects, auscultation natural over this side, except over a space about an inch in size, just below the spine of the scapula, where the respiration is bronchial, while above and below this point a vesicular murmur of healthy character is readily heard. Over this point, moreover, the percussion tone is normal, showing that the

bronchial respiration is not caused by an abnormal solid deposit.

Inspection.—The chest was bared and found by measurement to be smaller by $\frac{3}{4}$ of an inch on the left than on the right side. The tips of the fore-fingers were placed upon the acromial processes, and their movement observed during full inspiration, as recommended by Dr. Carson, of New York. The right was seen to rise higher and more rapidly than the left. The difference was very marked when the lower angles of the scapula were made the points of observation, the left appearing almost stationary.

On the whole, Dr. M. was inclined to believe that the case was one, not of phthisis, as he had at first supposed, but of chronic bronchitis, with dilatation of the bronchia, following upon an acute attack of pleurisy, which had given rise to thickening of the pleurae, adhesion between the two pleurae, and contraction of the side.

The want of correlation between the constitutional symptoms and an assumed tuberculous deposit in the left lung, has already been sufficiently considered. Let us glance at the physical signs again. In the first place, the small amount of disease in the right lung, as compared with the left, is opposed to the idea of phthisis. One lung is rarely found so healthy as the right is in this case, when the other contains a large amount of tubercular deposition. To be sure, there is some bronchial respiration, with moist sounds over the upper part of the right scapula, but this is limited to a very small space, and is not attended with the dulness in percussion which ought to be present were the bronchial respiration caused by an effusion of solid matter. These conditions are better explained by the theory of an enlarged bronchus. Above and below this point, the vesicular murmur is natural, as it is also in front, above and below the clavicle. Again, in regard to the left lung—the signs of excavation in the infra-clavicular region are not positive. The respiration is bronchial rather than cavernous, and the rales rather largely subcrepitant and mucous than gurgling. On one occasion a large, moist rale, heard at this point, was clearly perceived to be a consonating trachial rale. Behind, also, the signs of excavation are most marked at the inter-scapular space, where the bronchi are of largest size, while above, the respiration is only harshly bronchial. To conclude, the dulness on percussion may be explained partly as the result of pleural thickening, and partly, as the result of that induration of the lung-tissue which has been well shown by Dr. Walshe, and by Jones and Sieveking, to accompany quite frequently chronic dilatation of the bronchia.

The treatment had been throughout, cod-liver oil, quinine, and full diet.

Chorea.—Patient a girl, 15 years of age; ad-

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mitted 14th of June; duration of disease five years; was caused by fright; passed some worms in the beginning of the disease; has now a blowing murmur at the base of the heart; headache and constipation. Her walk is the peculiar tottering, dragging gait of this disease.

Treatment.—At first the wine of the citrate of iron and zinc, and strychnia, were productive of no benefit, and were discontinued. Two weeks ago, she was placed on the use of arsenic and iron, in the form employed by Dr. Wilson in the treatment of eczema.

R Liq. potas, arsen. ꝑxxxij.,
Vini ferri,
Syrup. tolutan., aa. fʒss.,
Aque anethi, fʒi. M.

Dose.—A teaspoonful three times a day, directly after meals.

The patient has a cold shower-bath, every day, and full diet.

Dr. M. believed the disease to be dependent upon a faulty crisis of the blood,—at least, this was present in all the cases he had seen. His patients had always been pallid and anæmical, and in severe cases, they were so to a very great degree. The portion of the nervous system chiefly implicated was, in all probability, as pointed out by Dr. Carpenter, the upper part of the cranio-spinal axis. The excito-motor and sensori-motor functions were excited and exaggerated beyond their healthy rate, whilst the power of the will over the voluntary movements was greatly reduced. The co-ordinating power was lessened, whilst the reflex movements, and those occasioned by emotional excitement were exaggerated.

The remedies most useful were stated to be iron, arsenic, cicicifuga, and the cold affusion or shower-bath. In very severe cases, attended with loss of strength, and marked anæmia, Dr. M. had used, with great benefit, cod-liver oil, iron, and milk-punch.

SEPTEMBER 21st.

Hydræmia.—The patient a young woman, admitted July 29th, and about to be discharged convalescent. Her cure has been very satisfactory; her treatment, simply Huxham's Tincture and Metallic Iron. When admitted, she was not able to walk up stairs without fainting; she had a violent palpitation upon the least exertion; dyspnœa, and loss of muscular power; a bellows murmur over the apex of the heart, not the position where this sound is usually heard, and a venous hum in the large veins of the neck.

The iron in her treatment was accidentally omitted a week or ten days, and she ate some unwholesome food, and immediately began to retrograde, but re-

suming the iron, has, since, steadily progressed toward a cure.

Phthisis, Two Cases.—*Case 1st, Incipient.*—Patient a woman, 30 years of age; admitted a week ago; duration of sickness, 5 months. She was ill protected from cold, in her own house; and in March was attacked with a cough; no pain, chill, or coryza. She has had several hemorrhages, of moderate amount. She is now thin, pale, weak, without appetite. Auscultation and percussion, performed before the class, left no doubt as to the nature of her disease—phthisis, limited to the upper lobe of the left lung.

Treatment.—Cod-liver oil, iron and quinine, and a small blister every few days to the clavicular region; in addition, a good, wholesome diet. Her continuing to menstruate, Dr. M. thought a favorable symptom; the cessation of this function in advanced disease may be looked upon as an effort of nature to arrest a drain upon the system.

Case 2d.—Patient a weaver, 21 years of age; sick since the 25th of June, and admitted a month ago. One of his family has died of thoracic disease. He was attacked at first by cough and coryza. After the commencement of his illness he drank immoderately of ice water, and was seized with violent pain in his side.—He has not been able to work since. His expectoration has been slightly tinged with blood. There has been no copious hemorrhage.

Percussion.—Left side, from lower angle of scapula downward, dull; right, natural. In the interscapular spaces no material difference. Left, below clavicle, sonorous; right, also sonorous; if any difference, the left has a little higher tone. Above the clavicles the sounds were the reverse of these. These minute shades of difference Dr. M. remarked it was important to notice. If we could make out any difference, it was our business to explain it, for both sides ought to be alike.

Auscultation.—At the point of dullness in the left infra scapular region, an abundant, moist rhonchus, both in inspiration and expiration. Right side, vesicular murmur strong and healthy.

In coughing and speaking, the left side is most resonant to the ear.

Upon the same side, under the clavicle, the respiration is that called *saccadée*, or jerking; this is thought to depend on an impediment to the air vesicles in inspiration.

Upon the right side the respiratory sounds are good.

Treatment.—Cod-liver oil and tr. of chloride of iron, with morphia for his cough.

Iodine ointment is also rubbed over the lower part of the left posterior and lateral regions.

This man, Dr. M. remarked, I have no doubt, is tuberculous; he has the prolonged expiration, jerk-

ing respiration, dullness over the left clavicle, and night sweats of phthisis. I believe it to be one of the few cases in which the disease commences in the lower lobe of the lung.

Medical Societies.

ACADEMY OF MEDICINE. (NEW YORK.)

[Prepared for the MEDICAL AND SURGICAL REPORTER from phonographic reports.]

The meeting of the Academy on September 21st, notwithstanding the exceedingly bad state of the weather, was well attended—young America predominating—as it had been understood that quarantine and yellow fever were to form the subjects for discussion this evening, and that Dr. Griscom would open the debate.

After the minutes of the last meeting had been read and approved, the President, Dr. Watson, called upon Dr. Griscom to open the discussion.

Dr. GRISCOM observed that he was ready to open the discussion with a few remarks, if the Academy wished him to do so; but he regretted the absence of two gentlemen in particular, to whom this matter was of great interest; and as he would make statements and advance views in opposition to those entertained by these gentlemen, and would like to have their views on the subject (referring to Drs. Francis and J. M. Smith) he would hence suggest, whether it might not be better to lay this subject over to another meeting, when these gentlemen would be present.

After a few remarks by several gentlemen, a motion of postponement was carried.

In the absence of any regular subject for discussion, cases of interest were called for by the President.

Anasarca.—Dr. GRISCOM remarked that he had recently met with a very interesting case of *anasarca*, which he supposed resulted from disease of the liver, though not positively certain as to the precise pathological condition of that organ. The case derived its interest from the rapid manner in which the dropsical effusion disappeared upon the administration of *apocynum cannabinum*, combined with juniper berries. The formula in which the remedies were used was as follows:

R Apocyni. cannabini, \mathfrak{z} ss.
Baccarum juniperi, \mathfrak{z} i.
Cinnamomi, \mathfrak{z} i.
Aque, Oij. M.

And boil down to a quart.

The remedy produced very little purging, but acted principally upon the kidneys, producing pro-

fuse diuresis, under which the effusion rapidly disappeared.

A similar case was recited by another member.

Case of Traumatic Tetanus—Recovery.—Dr. GARRISH related the following case:

He was called about three weeks ago to see a little girl ten years of age, who had, while gathering wood from the side-walk, ran a nail entirely through her foot. The nail entered at the planter surface, and came out near the ankle-joint. The injury was such that she was unable to walk more than half a block, and had to be carried home. Her mother had great difficulty in extracting the nail. Nothing untoward took place until after the expiration of 24 hours. She was then seized with pain in the foot which gradually increased until it became of a very severe character. At this time Dr. Garrish was requested to see her. It was then about thirty hours since the accident. He found her with slight spasmodic action about the muscles of the jaw on the right side; (the nail had penetrated the right foot.) The case was at once recognized as one of tetanus.

The foot was placed in hot water, and kept in it for about three or four hours. Counter-irritation with croton oil was applied along the spine, and the patient put on assafetida, of which two grains were given every two hours, with a quarter of a grain of hyoscyamus. Still the spasms continued to increase. After about forty hours, opisthotonos set in, so intense that it was impossible for the back to touch the bed, the body forming a complete arch. At this time the patient would not allow any one to touch her. Finding that she had not slept any, the Doctor commenced giving her chloroform, letting her inhale it moderately. Under its influence the spasmodic action of the muscles all subsided, and the patient laid quietly for about an hour, and appeared to be in a state of unconsciousness. At the expiration of an hour she again became conscious, and the spasms returned. The medicine was directed to be continued, increasing the dose of assafetida to four grains, with quarter of a grain of hyoscyamus. The chloroform was again resorted to, whenever the spasms appeared. At the expiration of six days, all the symptoms had subsided. The girl soon recovered perfectly, and is now running about. Dr. Garrish attributes the cure to the assafetida.

Dr. WATSON inquired as to the nutriment given.

Dr. GARRISH.—A little beef tea and chicken broth. The spasms about the jaw were so very violent that swallowing was difficult.

Dr. BATCHELDER wished to inquire whether any particular notice had been taken of the pulse.

Dr. GARRISH stated that it had been noticed, and was as high as 115 to 125; not higher than 125.

A member wished to know whether any subsi-

dence of the symptoms had been observed *before* the administration of chloroform.

DR. GARRISH.—There was none before the chloroform was given; the chloroform, however, only relieved the patient temporarily. After the effect of the chloroform had passed off, the symptoms resumed their violence. It appeared to him that the chloroform had *no influence in the cure*.

A member, whose name we could not learn, remarked that his experience had been in favor of chloroform alone. In one successful case he gave it as a dernier resort internally.

DR. FINNELL remarked, that in one of the recent foreign journals there was an article published, where a number of cases were drawn up, in which most of the active narcotics had been used. The conclusion arrived at was, that these agents possessed no curative properties. Assafoetida had also been faithfully tried, without much effect.

DR. WATSON remarked that he had had a great deal of experience in this disease, and believed that he was the first to introduce that remedy. He used it in his early professional years, and has given it since in almost every case; yet he placed very little reliance upon it as a curative remedy, but has used it simply as a palliative. He does not believe that there is any remedy that will cure this disease, any more than we can cure small-pox. It will cure itself—it has its own limit. With regard to the effects of chloroform, etc., he does not believe that they possess any curative powers. If you can prevent spasm of the glottis, paralysis of the heart, exhaustion of the nervous system, which are the immediate causes of death in these cases, the disease will cure itself. It is extremely necessary to stimulate, in order to keep the system from exhaustion. Dr. Watson has now under treatment a little patient, who has had tetanic spasms for several weeks, and who has taken a pint of brandy a day, without producing intoxication.

Case of Embolus.—DR. BARKER related the following case:

He was called to see a lady, *æt.* 59 years, of spare habit, who had been unusually healthy in every respect. On Thursday last she observed that her left arm had suddenly began to swell. When Dr. B. saw her, the arm was swollen to about four times the size of the other arm. The swelling was not accompanied by any redness of the surface; it did not pit on pressure, but was apparently simply distended. The pulse on the affected side could not be felt on account of the swelling. The pain was very great, and was particularly referred to the under side of the arm, near the shoulder.

At first Dr. B. did not know what to make of the case. He questioned her in regard to every possible exciting cause, but could only learn that she had

occasionally had palpitation of the heart, after moderate exertion; that she had sometimes had oedematous swelling of the feet. Upon examination, the line of dullness of the heart was found to be increased, especially towards the right, and the first sound was accompanied with a loud murmur, so loud, indeed, as to obscure the natural sound almost entirely. His diagnosis, therefore, was dilatation of the right side of the heart, together with disease of the tricuspid valves, and he concluded that the swelling of the arm was caused by the formation of a clot, which had blocked up the brachial vein.

Friction was then applied to the arm with camphorated liniment, and the arm brought into a perpendicular position. In the course of an hour the swelling had in a great degree subsided. The Doctor was about leaving the house, when he was suddenly called back. They told him that she was fainting. He went to her room immediately, and found truly an alarming state of affairs. The countenance of the patient was pale and haggard, large drops of perspiration covering the face. He thought the patient was dying, and commenced giving stimulants as fast as he could get them down. Thinking that emotional agitation might have had something to do with this sudden prostration, he ordered

R Ether. chloric. fʒi.
Morphine sulph. gr. ii.
Olei valeriani, fʒii.
Syrup simplic. fʒi. M.
Give a teaspoonful every hour.

Six hours afterward she became a little better, and passed the night quite comfortably. The next day the swelling had almost entirely disappeared. She has enjoyed her usual health since. She took a pint of brandy before eleven o'clock that night, and although usually very susceptible to stimulants, this produced no intoxication.

The Doctor related the case in order to ask the opinion of the Academy as to the correctness of his views on the pathology of the case. No practical remarks were made, however, the Academy evidently coinciding with the Doctor's views.

A resolution was offered by Dr. McNULTY, opposing the recommendation of a certain preparation of cod-liver oil, upon which the section on materia medica had reported. After a protracted debate, it was referred to the Council. [*See correspondence.*] GOTHAM.

Those diseases which medicines do not cure, iron (*the knife*) cures; those which iron cannot cure, fire cures; and those which fire cannot cure, are to be reckoned wholly incurable.—*Hippocrates.*

In all the branches of medical education, oral instruction must always enter as a prominent and important feature. There is, perhaps, nothing better adapted to fix the attention of a class of pupils, and to impress upon the mind of each of its members clear views in respect to the existing state of knowledge upon any given subject, than skillfully prepared and well delivered lectures, especially when fully illustrated and recapitulated at regular periods by a series of examinations extended, in turn, to every member of the class.

In connection with the lectures on some, at least of the branches of medical science, an important improvement may, we are convinced, be introduced. It is to furnish the pupil, in all cases in which it is practicable, with the means of testing practically, or—in other words—of demonstrating for himself the facts, principles, and directions taught him by the lecturer.

In respect to anatomy, this has already been done in the dissecting classes, and to a certain extent in respect to special pathology, practical medicine, and surgery, in the clinical wards of our hospitals. The system may, however, be extended also to chemistry and pharmacy,—classes being organized for the purpose of repeating the various experiments and manipulations exhibited in the regular course of instruction, as well as to physiology and pathology,—in both of which latter branches, the student, by comparing diseased with normal structures, and subjecting them both to the test of the microscope and of the processes of organic chemistry, under the direction of an able and judicious guide, would be able to acquire an amount of useful knowledge and practical skill in professional investigation that could be obtained in no other way.

—o—

DR. EVES, Surgeon to the Cheltenham General Hospital, England, has recently performed amputation above the knee with successful result, in a case of elephantiasis.

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EVERY pound of Cochineal contains seventy thousand insects.

Illustrations of Hospital Practice.

PENNSYLVANIA HOSPITAL.

SEPT. 24TH.

Service of Dr. J. Forsyth Meigs.

(Reported by Mr. J. B. Hayes.)

Albuminuria.—Exhibited to the class on two previous occasions. (See REPORTER, Sept. 24th.)

It will be recollected that it was difficult to produce an evacuation of the bowels. The compound jalap powder, elaterium, castor oil and turpentine, were in turn administered.

His symptoms have improved. He passes now five pounds of urine in 24 hours, his bowels are regular, his cough better, and the tension of the skin of the abdomen and legs somewhat less. The penis was still greatly distended. The albuminous deposit continues less than it was.

Treatment.—Still upon the bitartrate of potash, with juniper berry infusion; also tr. ferri muriatis, xv drops three times a day. He also has a hot vapor bath every other night to promote the function of the skin.

Hypertrophy of Liver and Spleen—Probable Tuberculous Diathesis.—The patient was a man 42 years of age, by occupation a weaver, born in Ireland, and has been in this country 6 years. In 1855 he injured his back, and since that time has suffered from fugitive pains, with occasional cough, dyspnoea and debility, at times being confined to his bed. The swelling of his abdomen began last December, decreased, and returned last July. He was treated for ascites at one time out of the house. He was admitted to the hospital on the 12th of August. There was then no effusion into the peritoneum.

Inspection.—General appearance emaciated; abdomen enlarged and distended, especially in the hypochondriac and epigastric regions. The iliac and hypogastric regions being nearly natural in size, the enlargement of the abdomen assumes a barrel-shaped appearance; veins of abdomen enlarged and prominent.

By palpation the hand was conscious of an unusual enlargement in the upper lateral regions of the abdomen, produced by the presence of two large tumors. In the middle the hand could be depressed between the two tumors, and some inches below the umbilicus the abdomen was relaxed and supple.

There is marked fluctuation, which is not so distinct when one hand is placed on its edge in the median line of the abdomen. By percussing over the pubic region in the horizontal and then in the vertical position, the change from the recumbent to the upright posture, a moderate effusion can now be detected in the peritoneum. This did not exist two

weeks ago. These tumors, Dr. M. remarked, are two in number, are divided by a sulcus towards the left of the median line, and are, I have no doubt, the liver and spleen. The larger one sweeps from the left side of the epigastric region nearly to the crista illi of the right side, percussion over it is quite dull and resisting, and clearly marks out its boundaries. It is evidently a greatly enlarged liver. The other tumor juts out from beneath the left false ribs, and extends downward in an irregularly oblong form to some inches below the line of the umbilicus. It is formed by a greatly enlarged spleen. Both tumors have smooth, rounded edges. They have to the touch, a somewhat doughy feel, without any thing like fluctuation, without the hardness of carcinomatous disease, and entirely without knobbed or irregular projections or protuberances at any part.

Examination of Chest.—*Percussion* under the clavicles shows the left to be of fuller tone than the right. There is but little difference in the upper posterior regions. *Auscultation* shows distinctly a somewhat harsh murmur, with some prolongation of the expiration under the right clavicle. On both sides the sounds are a little louder than in health; his emaciation and the pressure on the lungs from below account in part for this. In the lower lobe of the right lung, behind, there is well marked crepitation, especially toward the close of inspiration, and some dullness on percussion, as compared with the other side. There is no cough.

The action of the heart is natural. The apex beat is in its normal position, but so feeble that it is with difficulty that I can localize it. I believe he has no cardiac disease. His tongue is clean, soft, moist, red, and healthy; no inference can be gathered from it. His gums are unhealthy, but that is no unfrequent thing with hospital patients, whose gums, from neglect of the tooth brush, are often found soft and flabby. He is not jaundiced; he has epistaxis, and is costive.

The patient was here removed and Dr. M. remarked: This is an interesting case, and we must endeavor to form a correct diagnosis. It is important to know the cause of the enlargement of these organs. Their hypertrophy is proved in various ways—by inspection, by palpation, by percussion, by the enlargement of the superficial veins, and the presence of some peritoneal effusion. His lungs are not in good condition, and though he has no cough, I believe that he is tuberculous. He has a fine crepitation over the lower two-thirds of the right back. That crepitation I am confident is not caused by pneumonia, pleurisy, or bronchitis. In my opinion he has a tuberculous deposit in the right lung, and this lends assistance in explaining the cause of the enlargement of the liver and spleen. We have here a lardaceous liver and spleen, or bacony, or albu-

minous, as it has been called. It is not cirrhosis or cancer, for the tumors are smooth. There are no nodosities; they are doughy to the touch, and feel almost as though they might pit under pressure. There are other reasons against the presumption of cirrhosis or scirrhus; in both of these diseases the liver is harder, the obstruction to the portal circulation is greater, and there is usually a larger amount of ascites early in the disease. This man is not jaundiced; on the contrary, he is pale. The enlargement here depends, in all probability, on an albuminous deposit into the inter-lobular areolar structure. The liquor sanguinis of the blood is effused, the serum is absorbed, and the fibrin remains behind and contracts. It is what Dr. Budd calls serofulous enlargement. He has the clubbed nails, which are a sign of tuberculous disease. I thought at first that he might have leucocythemia, but the number of white corpuscles in the blood is not increased. The blood has been carefully examined under the microscope on three occasions.

Treatment.—He has good diet. I have put him on the muriate of ammonia, $7\frac{1}{2}$ grains three times a day. This is recommended by Dr. Graves of Dublin, who reports several cases of enlarged liver cured by muriate of ammonia, when there seemed but little hope of recovery.

He also takes tr. ferri. mur. xv drops three times a day.

Chorea—This occurs in a seaman 35 years of age, whose story is, that it began to manifest itself immediately after a great fright, five weeks ago. He was in a coasting vessel which lost its anchor during a gale. He says that, previous to this, he has always been healthy. I can find in him no deranged function—no symptom of any other disease save this extraordinary one—chorea. Of the exact nature of this disease, we know but little. It appears to be a functional derangement of the nervous centres, connected in some way with a faulty state of the blood, which, as I stated in a previous lecture, I have nearly always found thinned and hydræmic. By Romberg it is classed among the spinal spasms. Dr. Carpenter, with correctness, it seems to me, locates it in the upper portion of the cranio-spinal axis, arguing that the influence exerted upon the irregular muscular movements by emotional states, and yet more, the quiescence during sleep, show that not the true spinal centre, but rather the emotional and volitional centres must be the parts chiefly implicated.

It has been very generally supposed that there was some essential connection between chorea and rheumatism. This is the opinion of many of the best English writers, and amongst the French, is M. Sée, whose essay, published in the *Memoirs of the Imperial Academy of Medicine*, is a very full and

EDITORIAL DEPARTMENT.

PHILADELPHIA, SATURDAY, OCTOBER 1, 1859.

THE THIRD VOLUME.

The prospectus of the third volume of the *MEDICAL AND SURGICAL REPORTER* has been for sometime before our readers. They will see that our march is still onward, both in respect to quantity and quality of matter. Through the kind consideration of the profession toward our enterprise, we have been enabled to extend our arrangements for the year, upon which we enter this week. Besides adding several pages to our weekly issue, we have, as heretofore announced, improved our arrangements for clinical and medical society reports. From New York we shall be in the regular receipt of reports prepared from photographic notes of medical matters in that city. We are also extending our correspondence in other directions, it being our determination to uphold the general interests of medicine in this country. Our profession has *suffered* for the want of a *popular* representative, and we trust that they will ever find the *REPORTER* faithful to the high trust that they are confiding to its keeping. When we forget the heaven-born mission of our profession, the high tone of morals, the dignified (though not "straight-laced") bearing that becomes the votary of science—when we lose sight of the fact that our profession are, and ever will be, cultivators in fields of science whose bounds reach beyond the confines of time—when, forgetting our high professions, yet humble attainments, we descend to "fables which minister questions" and gender strifes, rather than the advancement of our readers in knowledge—then will we be unworthy representatives of medicine, and our enterprise should be consigned to oblivion.

A leading feature of this journal is the weekly reports of clinics and medical society debates. These, for reasons that are apparent, will be more prominent during the winter than the summer months, and it is our intention to have them more select in future than they were during a portion of the past year, by omitting cases of minor interest or importance.

This we will be enabled thoroughly to accomplish, we think, as we have a wide field to labor in, and in our principal cities are to be found clinical teachers who are quite equal to any in Europe.

The Periscope department will not be neglected. In it we shall give brief summaries of home and foreign improvements in medicine and surgery, and endeavor to keep our readers fully up to the literature of the times in all branches of medical science.

The second volume just closed, comprising the labor of the past six months, contains a vast amount of material presented in a very attractive style. The index covers nearly *six* double column pages, and there were original communications from nearly *sixty* contributors. This is a very fair exhibit of the importance to which our enterprise has already attained, and the readiness of the profession to avail themselves of its pages as a vehicle through which to diffuse their thoughts.

ATLANTA MEDICAL COLLEGE

We would call the attention of our readers to the advertisement of the Preparatory Course of Lectures in the Atlanta Medical College. The Professors in that school have won for themselves an enviable reputation as medical teachers, and the *practical character* of their preparatory course will make it exceedingly valuable to the student.

Correspondence.

New York, September 26, 1859.

NOSTRUMS.

You will perceive in the account of the proceedings of the Academy of Medicine, of September 21, which I send you, that an ethical question was brought up, which I consider as of the highest import; notwithstanding the opinion of some, who—whenever a question of ethics is brought up—decry it as an intrusion upon the legitimate business of medical societies. The question, in this instance, is a very simple one; and, if the members of the profession will but look at the *practical* bearing of such questions, it will be obvious that they are not only called for, but that their

definite and *uncompromising* settlement becomes a paramount necessity, arising from our duties, as a profession, to the public, as well as from a proper regard for our own honor and dignity.

Every one of your readers has probably met with newspapers in which some patent medicine or preparation was advertised "*as approved by the Academy of Medicine*," and under this sanctioning label it is bought by the ignorant sick and their friends, and taken according to the dose and directions on the label or the "*unavoidable pamphlet*" accompanying the bottle or box, in an heterogeneous multitude of diseases, without the advice or counsel of a physician.

Now, I humbly ask, what is the difference between the *Academy of Medicine* referring any patent medicine or nostrum to their section on materia medica, and through *them* recommending and approving of it; and the *individual* physician to whom some friend applies, who has compounded a nostrum, and who—on a careful examination—finds it a good preparation? What is the difference between the individual physician who puts his signature of approval to a nostrum, and the Academy, who does the same thing through its section on materia medica? Theoretically, we can see none. But the *practical* difference is this,—*that the individual physician, if a member of the Academy, would be liable to expulsion for doing INDIVIDUALLY what the Academy is in the habit of doing AS A BODY.*

I give to your readers a summary of the case under question:—

The section on materia medica presented a report upon a certain preparation of cod liver oil, manufactured in this city. The report was accepted. When the *adoption* of this report came up, considerable discussion took place.

Dr. McNulty remarked, that, without having reference to this particular preparation, he hoped that the report would not be adopted by the Academy. The result, as past experience had shown, would be unfortunate. All the manufacturer wishes is, that the Academy may approve of his particular preparation, so that he may spread broadcast over the land, by advertisements in every city, country, and village newspaper, "*Approved of by the Academy of Medicine of New York*," with a long list of all its officers thereunto attached. He, would ask the members for what reason these men endeavored to get their nostrums washed through the Academy, if it were not that they

might place the solid dollars in their pockets. The recommendation of this body is worth thousands of dollars to them, and they know it. Again,—we have no security that these men, after they obtain the approval of the Academy, will not palm off a miserable substitute for the original preparation; and to this deceptive substitute each prominent member must have his name ingloriously affixed. He would therefore offer a resolution, preventing the adoption of the report.¹

Dr. McNulty wished to be understood in this matter. He did not have any particular reference to the preparation here presented, but wished to prevent hereafter the entrance of nostrums for the sanction and approval of the Academy.

It may be said, he continued, that the Academy have the power to revoke any approval or sanction which they have granted. But if you take a step of this kind, you will be obliged to state your reasons; and should any thing be said which would tend to prevent the sale of a preparation, or anything charging the manufacturer with adulteration of the original article, the members presenting such a report would be liable to be sued for damages.

It might be said, why should we not permit these articles to be brought forward? The Academy of Medicine at Paris has hardly a meeting without something of this kind being presented. This we readily admit; but the Academy of Medicine at Paris have a power which we have not. They can at any time entirely prevent the sale of any preparation which they have recommended. They have only to enter a complaint against any nostrum approved of by them, and its sale will be strictly prohibited by government. This we are unable to do. If these men obtain our approval *once*, they have it *always*; and this is the reason why the makers of these preparations endeavor, by every possible method of "log-rolling," to get their nostrums brought to the notice of the Academy of Medicine.

In conclusion, the doctor hoped that his resolution would be sustained,—at least, he hoped that a vote would be taken upon it, as he wished to have the opinion of the Academy upon this subject. If he was right, he wished to be sustained; if wrong, vote the resolution down.

¹ As I have no desire to give notoriety to any specific preparation, I abstain from giving the original resolution, inasmuch as it contains the name of the article and its manufacturer.

It was objected, on the other hand, that the resolution did not embody the spirit of the doctor's remarks, viz., that of preventing hereafter the bringing forward of these preparations and nostrums to the notice of the Academy for their approval.

At the request of *Dr. Barker*, the motion was then withdrawn, also a substitute offered by *Dr. Griscom*, and the whole matter subsequently referred to the council.

It is to be hoped that the latter will soon report, and recommend such action as is best suited to abolish this abuse.

THE SCHOOLS.

The preliminary courses in our various medical colleges have now fairly commenced, and if any estimate can be formed from the present attendance, we do not hesitate to predict that the number of matriculants and graduates will be far more than in any previous year. Each institution, of course, makes strenuous efforts to induce students to patronize it; and the result of this honorable competition has been, as one would naturally infer, a full course of lectures, more interesting, more elaborate, than is usually the case.

Yours,

GOTHAM.

Medical News.

Influence of "Burial Clubs" on Infant mortality.—The *Med. Times and Gaz.* says: That it is to be feared that the existence of burial clubs among the poor is, indirectly, one of the fertile sources of our increased infant mortality. The subject has lately been prominently brought into notice in a work, by Mr. Joseph Kay, on the "Social Condition and Education of the People," especially in a chapter, "The Frightful Extent of Infanticide among our Poor." A collector of a burial society states to Mr. Kay: "The poor people often told me that they were unable to pay at the time of my visit, but when a certain member of a family died—generally a child—they would be able to pay." The collector of a burial society in Manchester states strong grounds for believing that it has become a practice to neglect children for the sake of the money allowed at their death. A lady stated that a young woman whose service she required as wet-nurse, having a child ill, she offered to send her own medical friend to see it, but the

reply was, "Oh! never mind! it's in two burial clubs."

It also appears, on the authority of a burial club official, that hired nurses often speculate on the lives of infants committed to their care, by entering them in burial clubs; and that "two young women proposed to enter a child into his club, and to pay the weekly premium alternately. Upon inquiring into the relationship existing between the two young women and the child, it was ascertained that *the infant* was placed at nurse with the mother of one of the young women!" Comment on these statements is unnecessary, as the facts speak but too plainly for themselves.

Prof. Henry Bronson, who has for several years held the Professorship of *Materia Medica and Therapeutics* in the Yale Medical School, has tendered his resignation, to take effect after the winter course of lectures. Dr. Charles A. Lindsley, a graduate of Trinity College, and an excellent physician, has been nominated as his successor, and will assist in the winter course of lectures.

A Veteran Horse—Gen. Jackson's old horse is dead at last, at the age of forty-one years. For several years he has been unable to masticate, and was fed with bran, &c. The defunct carcass of this famous old horse was interred with all due solemnities "in the presence of a large concourse of his old friends." It would have been better to have placed his skeleton in the museum of the University of Nashville, where it would have been an object of interest an hundred years hence. This was quite an oversight, and, perhaps, it is not too late to remedy it.

Dr. Winship, of Boston, the famous "strong man," has accepted invitations to lecture this winter at Rochester, N. Y.

Experiments have been made in watering the streets of Lyons with hydrochloric acid. The *Med. Times and Gaz.* says, that it hardens the road, and, by its deliquescent property, keeps it moist.

We understand that Sir Henry Holland, M. D., Bart., Physician to Queen Victoria's household, was in this city during the past week. We are pleased to welcome this distinguished physician among us again, after so brief an absence.

Army and Navy Intelligence.—Assistant Surgeon Charles T. Alexander has been directed to accompany "D," First Infantry, to the site of the new military post recently established in the Wachita Country, Texas.

Assistant Surgeon P. A. Quinlan will proceed to Fort Unpagna and relieve Assistant Surgeon Vallum, who will proceed to Fort Crook and report for duty.

Assistant Surgeon W. A. Hammond has been directed to repair to Fort Mackinac, Michigan, and relieve Assistant Surgeon J. F. Head, who has recently been granted a leave of absence.

Assistant Surgeon E. Swift, now on leave of absence, has been permitted to visit Europe.

Assistant Surgeon W. J. L'Engle has been ordered to proceed to and report for duty at Fort Mason, Texas.

Surgeons Joseph Beale and D. Harlan have been ordered, as members of a Board, to examine candidates for admission into the Naval School.

Dr. Henry H. Smith has sent in his resignation as one of the surgeons of St Joseph's Hospital in this city. We are sorry to hear this, as Dr. Smith is one of our best clinical teachers, and we hope, ere long, to record the fact, that this hospital is open for the purposes of clinical instruction.

Dr. S. W. Butler has been appointed Chief Resident Physician to the Philadelphia Lunatic Asylum.

The Clinic, at the Philadelphia Hospital, is held by Drs. J. L. Ludlow and D. H. Agnew on every Wednesday and Saturday morning.

The introductory lecture to the winter session of the Clinics will be delivered by Dr. J. L. Ludlow on Wednesday, the 12th inst.

The hospital is accessible by the Market Street Passenger Railway.

"Firing up" with Mummies.—It is a curious fact that the bodies of the most enlightened nation of its time, many centuries ago, are now made to aid in getting up steam in the present fast age. On the new railway in Egypt, the first locomotive run used mummies for fuel. The bituminous matter used to embalm them and to seal the wrappings makes them very inflammable. The supply of mummies is said to be inexhaustible, and they are used by the cord!

TO CORRESPONDENTS.—Mr. B., Lancaster, Pa.—The University of Heidelberg is not free. A part of the regular course can be attended without expense, and the entire fee for the course will not exceed fifty dollars. The cost of living need not be more than half that usually expended by students in this country.

Student.—The appointments of Resident Physicians in the Philadelphia Hospital will be made early in next April. Candidates will be examined by the Medical Board of the Hospital and presented in the order of merit to the Board of Guardians, by whom the appointments are made.

Communications Received.—Illinois—M. M. de Levis, Dr. J. W. Freer, Dr. M. Shepherd (with enclosure.)

Iowa—Dr. John Kerr, (with enclosure,) Dr. J. C. Risley, (with enclosure.)

Indiana—Dr. W. H. Simmons, (with enclosure.)

Maryland—Dr. H. B. Wilson, Dr. Leander Wachter, (with enclosure.)

Mississippi—Dr. W. N. Ames, (with enclosure.)

New York—Dr. J. H. Griscom, "Gotham," (2), F. F. Mayer, (2), Dr. J. Pamel, (with enclosure)

New Jersey—Dr. I. S. Cramer, (with enclosure), Dr. W. Johnson, Dr. W. M. Brown.

Pennsylvania—Dr. D. Holmes, (with enclosure), Dr. O. D. Palmer, Dr. J. Brooke.

Tennessee—Dr. Thos. M. Woodson, (with enclosure.)

Virginia—Dr. W. H. Triplett, J. L. Dorsett.

Also, Subscriptions from Dr. J. Phillips, Dr. H. St.

C. Ash, Dr. S. H. Dixon, Dr. J. R. Earhart.

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Errata.—The Index in our issue of last week gave us so much more labor than we anticipated, that a part of our proof reading was too hastily done. We especially regret this in view of the many typographical errors contained in the translation of Canstatt's Laryngeal Asthma of Children. We note the most important ones:

Page 491, first column, line 10, for "by" read "with" choking.
" " " " 16, for "carnate" read "connate."
" " " " 27, omit "matter."

" second " " 10, for "the constitution" read "its presence."

" " " " 28, for "Landsburg" read "Landsberg," (so also wherever the name occurs.)

" " " " 30, for "the preceding development" read "the process of development."

" " " " 31, after "this view," insert "at least."

" " " " 30, for "indicator" read "indication."

" " " " 43, for "mere" read "more."

Page 492 " " " 5, for "forcible" read "sudden."

" " " " 47, for "produced" read "produces."

Page 493, first " " " 5, and elsewhere, for "Tourtonal" read "Tourtual."

Same page, for "Henke" read "Henke."

Page 493, first column, lines 19, 20, for "Hüter the same" read "Hüter much."

" " " " 29, for "lauri" read "lauro."

" second " " 10, and elsewhere, read "Fingerhuth."

MARRIAGES.

HEYS—CARLISLE.—In Brooklyn, Sept. 20th, by Rev. Dr. Paddock, John Heys, Esq., M. R. C. S., of Liverpool, to Marion, second daughter of the late Rev. S. H. Carlisle, of Rumford, Essex, England.

IDDINGS—RETZER.—In Lancaster county, Pa., on the evening of the 20th of September, by the Rev. L. C. Rutter, Dr. C. Edward Iddings, of Montgomery county, Md., to Harriet J., daughter of Mrs. D. A. Retzer, of the former place.

MCALLISTER—HAMILTON.—Sept. 22d, by Rev. W. R. De Witt D. D., Dr. H. N. McAllister, of Belle Fonte, Center Co., Pa., to Margaret, only daughter of the late Hugh Hamilton, deceased, of Harrisburg.

WHITE—CLEAVINGER.—Sept. 22d, by Rev. J. H. Cuthbert, Dr. W. H. White, of New Philadelphia, Ohio, to Maria Louisa, daughter of Wm. S. Cleavenger, of this city.

DEATHS.

BICKELL.—At Baltimore, Sept. 22d, Dr. Charles Bickell, in the 31st year of his age, late Assistant Chemist of the State of Maryland.

BARTON.—In Columbia, South Carolina, on the 20th of Sept. of disease of the heart, Dr. E. H. Barton, late of New Orleans.

The *Columbia Banner* says:—"Dr. Barton was a native of Virginia, and practiced medicine with distinction in New Orleans, where he long was a Professor in the Medical College there, and President of the State Medical Society. When the Mexican war broke out, he was appointed a Surgeon in the United States Army, and placed in the responsible position of the control of the Hospital at Vera Cruz. Here he pursued his investigations of yellow fever, and subsequently, after much study in New Orleans, elaborated and published his very valuable report on the subject, as Chairman of the Sanitary Commission. Dr. Barton was a gentleman of fine literary taste and scientific acquirement, and was highly respected by all who had the privilege of his acquaintance. Connected by marriage with the family of our venerable and respected fellow-citizen, Andrew Wallace, Esq., he had recently selected Columbia as his place of residence, and resumed the practice of medicine in our city. The sympathy of the community is with his family in their sad bereavement."

LEHMAN.—At Mt. Holly, N. J., on the 22d of Sept. of gout of the heart, Dr. Geo. F. Lehman, in the 54th year of his age.

The *Ledger* of this city says:—"Dr. Lehman was the son of Dr. George Lehman, who served during the whole of the Revolutionary war as a surgeon, and was two years in the English prisons. At the age of 21, Dr. Lehman was appointed Lazaretto physician, a post which he filled with eminent ability for 19 years, during which period he received many votes of thanks, and on two occasions pieces of plate

from the Board of Health, for successful treatment of small-pox and typhoid fever. The board, at that time, numbered among its members some of our most distinguished medical men. . . . Dr. Lehman was a well-educated man, of extensive information and natural vigor of intellect. He had warm social qualities, and naturally a genial and kindly nature, which endeared him to his friends, and add to the poignancy of their regret at his loss."

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The second session of the Preparatory or Winter Course will commence on the first Monday in November next, and continue until the last of the following February.

Lectures will be given daily by the Professors of the College, with examinations, dissections, and clinical instruction, as in the regular Summer Course of Lectures.

This Preparatory Course will not count as a full course in the requisites for graduation, neither is it obligatory on a student in order to be admitted to examination at the end of the regular Summer Course.

The fees for the Course amount to fifty dollars, which amount will be deducted from the fees of the ensuing Regular Course.

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Atlanta, Ga., Sept. 16, 1850.

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The opportunities for prosecuting Practical Anatomy are equal to those in any of the Colleges.

There are two large dissecting rooms, well ventilated and amply supplied with gas, water, and material. Lecture rooms, and anatomical museum, provided with everything necessary to elucidate this branch.

A full course of lectures on special and surgical anatomy will be delivered at such hours in the evening as will not interfere with the college engagements.

The Anatomical Rooms will be open every day, from 8 o'clock A. M. until 10 o'clock P. M. The Lecturer, or his Assistants, will be constantly present, to aid students in their dissections.

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